

I. Background

This section of the resource guide gives background information on the *Pick Your Path to Health* campaign. This can be used to help you target and organize your program to follow the specific leading health indicators of the campaign. This information can also be used to support any outreach or media activities you may pursue.

Overview of *Pick Your Path to Health*

This section provides details on the campaign, a list of the campaign's partners, a rationale for community-based programs, and the monthly health themes and action steps for each targeted population.

Overview of Women's Health

This fact sheet is a synopsis of the status of women's health following the leading health problems of American women.

Overview of Healthy People 2010

This section provides a summary of Healthy People 2010, including how it was developed, its goals and objectives, and the Leading Health Indicators as indicated in the government's Healthy People 2010 report.

Overview of *Pick Your Path to Health*

Pick Your Path to Health is a nationwide, community-based campaign, sponsored by the Department of Health and Human Services' Office on Women's Health. The goal is to help women take simple and time-sensitive steps to improve their health and provide tools for local communities to promote practical, culturally relevant action steps to wellness. The campaign recognizes that women of the new millennium are confronted with numerous challenges -- from the demands of home and family to the pressures of work, and suggests specific, life-oriented action steps in an effort to ease the path to better health.

Minority Focus

Pick Your Path to Health encourages health awareness among all women and specifically focuses on health issues as they relate to African American, Asian and Pacific Islander, American Indian and Alaska Native women, Latinas, women who live in rural areas, and women with disabilities—all who are at a higher risk for many diseases.

Women's Health Issues

Pick Your Path to Health is adopted from Healthy People 2010—the government's comprehensive set of health objectives aimed at reducing the existing health disparities between minority and white women over the first decade of the new century. Ten major health issues or leading health indicators for the nation were identified. The 2003 monthly themes of the *Pick Your Path to Health* campaign are based on these health indicators:

January —Spirituality
February—Weight Management
March—Physical Activity
April—Alcohol Use
May—Mental Health
June—Responsible Sexual Behavior

July —Drug Abuse
August—Health Care Access
September—Disease Prevention
October—Violence Prevention
November—Tobacco Use
December—Family

Culturally Appropriate Materials

The campaign delivers workable health messages called “action steps” through six, 12-month pocket planners addressing the health needs and concerns of African American, Asian and Pacific Islander, American Indian and Alaska Native women, Latinas, women who live in rural communities, and women with disabilities. The planners offer action steps for each week and emphasize the importance of making small changes to improve women's health. They also contain general health information, places to record health information, and various health resources. Other campaign materials include posters, community action kits, and a listserv that provides weekly action steps by email.

Dedicated Partners

The campaign is supported by over 50 national partners who help to spread campaign messages to communities and women across the nation. The campaign also has media partners that help to spread campaign messages through placement of *Pick Your Path to Health* information in diverse community newspapers across the country.

Overview of *Pick Your Path to Health*

Current PYPTH Partners:

- Alan Guttmacher Institute
- American College of Nurse-Midwives
- American Council on Exercise
- American Federation of State, County, and Municipal Employees
- American Federation of Teachers – Human Rights Department
- American Foundation for AIDS Research
- American Medical Women's Association
- American Nurses Association
- American Physical Therapy Association
- American Refugee Committee
- *Asian American Times*
- *Asian Fortune*
- ASPIRA Association, Inc.
- Association for Women in Science
- Association of Asian Pacific Community Health Organizations
- Association of Black Cardiologists, Inc.
- Association of Women's Health, Obstetrics, and Neonatal Nurses
- Black Women's Agenda, Inc.
- *Boston Chinese News*
- Center for Women Policy Studies
- Centers for Disease Control and Prevention – Office of Women's Health
- Church Women United
- D.C. Department of Health – Project WISH
- Democratic National Committee
- Eventro Inc.
- Family Violence Prevention Fund
- Girl Scouts of the USA
- HADASSAH
- Harvard Medical School's Center of Excellence in Women's Health
- Health Resources and Services Administration
- *Heart & Soul*
- *Hmong Times*
- Indian Health Services
- Indiana University Center of Excellence in Women's Health
- Interamerican College of Physicians and Surgeons
- International Bottled Water Association
- Iowa Department of Public Health
- Kansas Department of Health & Environment, Bureau of Health Promotion
- Kappa Alpha Psi Fraternity, Inc.
- *La Salud Hispana*
- *Latina*
- Look Good....Feel Better
- Magee Women's Hospital
- Minority Health Professions Foundation
- Mississippi State Department of Health
- National Alliance for Hispanic Health
- National Asian Women's Health Organization
- National Association of Community Health Centers, Inc.
- National Association of Hispanic Publications
- National Black Gay & Lesbian Leadership Forum
- National Black Women's Health Project
- National Coalition of 100 Black Women

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- National Council of Negro Women
- National Hispanic Medical Association
- National Institute on Managed Care, Inc.
- National Latina Health Organization
- National Women's Health Network
- National Women's Health Resource Center
- *Northwest Asian Weekly*
- Office of Women's Health – State of Georgia
- Office of Women's Health at FDA
- Oregon Health Division
- Pennsylvania Department of Health
- President's Council on Physical Fitness & Sports
- Red Lake Comprehensive Health Services
- *Seattle Chinese Post*
- Shiloh Baptist Church – D.C.
- Sigma Gamma Rho Sorority, Inc.
- Sisters Supporting Sisters, Inc.
- Society for Women's Health Research
- Spina Bifida Association of America
- Spirit of Women
- The Way of the Heart: The Promotora Institute
- WeSpeakLoudly™
- Woman of Vision International Inc.
- Women's Health Institute at Howard University
- Women's Research & Education Institute

Overview of *Pick Your Path to Health*

Rationale for PYPTH in Community-Based Programs

The purpose of the *Pick Your Path to Health* Campaign is to empower, educate and motivate women to improve their health. The best way to present information and encourage participation is to meet women where they already are in their health journey and to address their health goals within the larger context of their lives. Community-based programs are the natural vehicles in which to do this.

Community-based programs are based directly in the community where they have connections to the cultural and ethnic ties of the surrounding area. Their approaches to long-term health care and behavior change in the community are typically systematic and coordinated through education and participation within the community structure.

Because they are in the community, they are accessible by the people in the community. Issues such as lack of transportation, low income or lack of health insurance, which can be important factors in whether or not a person will seek or stay with getting assistance or care for their health needs, is often not an issue with community-based programs. Imbedded in community-based programs' missions is to work with those members of the community and to work with them on all levels of their lives.

A unique and important factor in the *Pick Your Path to Health* community-based program is the role of the Coach. The Coach is a vital component in implementing the program. The Coach serves as the link between the program and the participants. They provide personal attention to the individual health goals of the participants, assisting the participants with making reasonable and attainable objectives, and offering a framework of support by providing education materials, useful strategies, and an atmosphere of partnership and community.

The *Pick Your Path to Health* program can easily be incorporated into established community-based programs. Community-based programs can use the PYPTH's model of 12 health themes and practical action steps to create a tailored program or infuse the model into already existing programs. The PYPTH program is a flexible program meant to be tailored to the individual participant to help her with her specific health goals. PYPTH believes that a woman's ability to successfully change a behavior is the most important prerequisite for behavior change. Change starts with small, doable steps. Your program can help guide your participants through these steps to better health and make a real difference in the quality of their lives.

Monthly Health Themes and Action Steps for African American Women

January – Spirituality: Find the strength within.

- Take a moment to celebrate your spirit.
- Be your own hero. Take steps to solve a problem that's getting in the way of the rest of your life.
- Believe in yourself—write a list of five things you do best.
- Measure success by how much health, peace, and joy you have.
- Make a list of 10 victories you can celebrate in your life.

February – Weight Management: Vital for long-term wellness.

- Carry a water bottle with you every day and refill it at least three times.
- Listen to Grandma: “Put a little color on your plate each day. Greens are a good start.”
- Fruits and vegetables are the original fast food. Try a mango, papaya, or orange pepper.
- Burn some of the calories you take in—exercise can help you lose weight.
- Society's ideal doesn't have to be yours—love yourself for who you are.

March – Physical Activity. Stay active. Live longer.

- Keep your walking shoes handy. Go for a walk with a friend every day.
- Join a mall-walkers group.
- Put on some music and dance!
- Treat your family to some time at a community recreation center.
- Try a new activity this week—take a yoga class, join a sports team, or try salsa dancing.

April – Alcohol Use: Know your limits.

- Protect your unborn child. Alcohol can harm your baby, even before you know you're pregnant.
- Take a girlfriend's keys. Don't let a friend drive drunk.
- Stop at two drinks. Avoid behavior you may regret.
- Write down how much you drink each day this week. If you think it's too much, it probably is.
- Your children are watching—remember to set a good example.

May – Mental Health: Lower your stress.

- Don't sweat the small stuff: choose the really necessary things that need to get done today.
- Make yourself number “1” on your to-do list. If mama ain't happy, nobody's happy.
- Get together with your girlfriends at least once a month to laugh, cry and support each other.
- Protect your last good nerve. Try deep breathing, massage, meditation, prayer, and exercise.
- Don't be afraid to seek counseling.

Monthly Health Themes and Action Steps for African American Women

June – Responsible Sexual Behavior: Think before you act.

- Don't be afraid to say "no!" It's your body and your life.
- Put the "he" into health. Ask about your partner's sexual history.
- Get tested for HIV/AIDS. It's THE leading cause of death for young black women.
- Listen to your instincts. If it doesn't feel right, it probably isn't.
- You don't need symptoms to be sick. Get tested for STDs.

July – Drug Abuse: Use and you lose.

- Be a positive role model. Talk to children about drug abuse.
- Celebrate the resilience and pride of African American women who stay drug-free.
- Give addicts the support they need to quit.
- Don't experiment. You can become addicted to drugs even the first time.
- Call your local Narcotics Anonymous chapter at 1-818-773-9999. You can help or get help.

August – Health Care Access: Your health matters.

- Make a date. Schedule medical checkups with your best friend, and follow with a movie or a stroll in a park.
- Need a ride to the doctor? Turn to community groups for help.
- If you don't understand your doctor's instructions, speak up.
- Make a list of questions to ask your doctor and expect answers.
- Take a loved one to the doctor this week.

September – Prevention: It's better than cure.

- Have your blood pressure, blood sugar, and cholesterol checked.
- Ask your local pharmacist where to get a flu shot.
- Get a tetanus shot if you haven't had one in 10 years.
- If you're over 40, ask your doctor about mammograms.
- Schedule your Pap test and pelvic exam.

October – Violence Prevention: Empower yourself.

- Make a list of safe places you can go to protect yourself from abuse.
- Empower yourself! Sign up for a self-defense class.
- If you are going on a date, let at least one person know where you're going.
- You deserve better. If you want to leave, the police can help you do it safely.
- Keeping abuse a secret does not help anyone. Call 1-800-799-SAFE.

November – Tobacco Use: Smoking—costly to your LIFE and your wallet.

- Make a list of 10 things to do with your money instead of smoking.
- If you haven't started smoking, don't start.
- Make a pact with yourself not to smoke or allow smoking around your children.
- Create a no-smoking rule in your house.
- Quitting is hard. Don't give up. Call 1-800-994-WOMAN for help.

Monthly Health Themes and Action Steps for African American Women

December – Family: Get support from those who care.

- Invite the family of your child's friends' over for a get-acquainted barbecue.
- Plan a funny-family-story night and invite aunts, uncles, and grandparents.
- Share your dreams with your children and ask about theirs.
- Learn how to play one of your child's games.
- Have dinner with your family this week.

Monthly Health Themes and Action Steps for Latinas

January – Spirituality: Find the strength within.

Enero – La Espiritualidad: La fuerza interna

- Do something for someone who will never find out.
- Renew your spirit by watching a meditation or yoga video.
- Find a quiet place in your home for reflection or prayer.
- Take time to care for yourself and your spirit.
- Make a list of 10 victories you can celebrate in your life.

February – Weight Management: Vital for long-term wellness.

El control de peso: Vital para el bienestar de toda la vida

- Try cereal with low-fat milk or fruit and yogurt for breakfast.
- Don't fry all of your food—try baking, boiling, or steaming it with your favorite spices.
- Burn some of the calories you take in—exercise can help you lose weight.
- Carry a water bottle with you every day and refill it at least three times.
- Fruits and vegetables are the original fast food. Eat five a day.

March – Physical Activity. Stay active. Live longer.

Marzo – La Actividad Física: Mantengase active. Viva mejor.

- Start your spring cleaning early; it's a great way to exercise.
- Put in your favorite tape or CD and dance!
- Start to exercise gradually and work your way up.
- Keep your walking shoes handy. Go for a walk with a friend everyday.
- Try a new activity this week—take a yoga class, join a sports team, or try salsa dancing.

April – Alcohol Use: Know your limits.

Abril – Las Bebidas Alcohólicas: Conozca sus límites

- Host an alcohol-free party; try a virgin margarita or daquiri instead!
- Keep a record of how much you drink every week. If you think you're drinking too much, you probably are.
- Take steps not to get pregnant if you've abused drugs or alcohol in the past year.
- Do not get in the car if the driver has been drinking alcohol, even if that person is a family member. Call a cab instead.
- Seek counseling for everyone in the family if a member of your household is an alcoholic, even if the alcoholic refuses to attend.

May – Mental Health: Lower your stress.

Mayo – La Salud Mental: Reduzca el estrés.

- Have a Cinco de Mayo party with friends.
- If you're having a problem, call a friend.
- Depression is an illness that affects mostly women. If you feel depressed all the time, seek help.
- If you're having a bad week, ask a family member or friend to help with your responsibilities.
- Your self-esteem is important for good health. Don't allow anyone to bring you down.

Monthly Health Themes and Action Steps for Latinas

June – Responsible Sexual Behavior: Think before you act.

junio – Una Actitud Sexual Responsable: Piense antes de actuar.

- Don't be afraid to say "no!" It's your body and your life.
- Abstain from sex or practice safe sex every time.
- Don't be shy. Ask about your partner's sexual history. It's your right to be safe.
- Don't be afraid to talk to your children about sex.
- You don't need symptoms to be sick. Get tested for STDs.

July – Drug Abuse: Use and you lose.

julio – El Abuso de las Drogas: Si las usa es usted quien pierde.

- Don't experiment. Learn more about drug addiction at 1-818-773-9999.
- Some drugs don't mix. If you're taking prescribed medication ask your doctor before taking any other medications or supplements.
- Seek help if you or a loved one is abusing drugs. Call 1-800-729-6686.
- Do not take medications prescribed for others even if they're in your family.
- Be a positive role model. Talk to children about drug abuse.

August – Health Care Access: Your health matters.

Agosto – Acceso al Cuidado de la Salud: Su salud es importante.

- Ask your local clinic about low-cost or free mammograms and pap tests.
- Call 1-800-KIDS-NOW to learn about free or low-cost health insurance.
- If you're pregnant, get prenatal care. Call 1-800-504-7081 for help.
- Order your own Diario de Salud for expectant mothers who read Spanish: call 1-800-275-4772.
- Notify your health care provider early if you need translation assistance for your visit.

September – Prevention: It's better than a cure.

Septiembre – La Prevención: La prevención es mejor que una cura.

- Get your blood pressure and cholesterol checked—it could save your life.
- Remind everyone to get a flu shot, especially the elderly and those at high risk for catching the flu.
- If you're over 40, ask your doctor about mammograms.
- Ask your doctor about the hepatitis A and tetanus vaccines, especially if you work in restaurants or housekeeping.
- Schedule your pap test and pelvic exam.

October – Violence Prevention: Empower yourself.

Octubre – La Prevención de la Violencia: Ármese de valor.

- Make a list of safe places you can go to protect yourself from abuse.
- Have a plan ready in times of need.
- Stay in touch with family and friends. Your partner's attempts to isolate you are an unhealthy form of control.
- You deserve better. If you want to leave, the police can help you do it safely.
- Keeping abuse a secret, does not help anyone. Call 1-800-799-SAFE (English and Spanish).

Monthly Health Themes and Action Steps for Latinas

November – Tobacco Use: Smoking—costly to your LIFE and your wallet.

Noviembre – El Uso del Tabaco-costoso para su vida y para su bolsillo.

- Find a support program in your community to help you stop smoking. Call 1-800-994-WOMAN.
- Make an appointment with your doctor to find out about new methods to help you quit smoking.
- Become one of the 1.3 million Americans to quit this year. Visit “Breath of Fresh Air” at www.4woman.gov for help.
- Make a list of 10 things to do with your money instead of smoking.
- Make a pact with yourself not to smoke or allow smoking around your children.

December – Family: Get support from those who care.

Diciembre – La Familia: Reciba apoyo de aquellos que la quieren.

- Plan a family picnic and bring a soccer ball.
- If family responsibilities are causing stress, ask family members to help.
- Give everyone a chance to share his or her thoughts at a family dinner.
- Teach your children how to do traditional dances—salsa, merengue, etc.
- Teach your children to make maracas with paper maché and a balloon!

Monthly Health Themes and Action Steps for Women with Disabilities

January – Spirituality: Find the strength within.

- Value yourself. You are a unique person.
- Find a spiritual outlet—a way to lift your spirit through participation in yoga, meditation, art, exercise, a faith institution, or another activity that is meaningful to you.
- Take a moment to reflect on the beauty of your surroundings.
- Take some time to reconnect with yourself every day. Become your own best friend.
- Take an active role in enriching your community and the people around you—share your life, mentor a young person with a disability.

February – Weight Management: Vital for long-term wellness.

- Eat five fruits and vegetables a day. A serving is a medium-sized piece of fruit or a half-cup of chopped vegetables, cooked or raw. Dried fruits count!
- Eat five to six small, well-balanced meals a day—make every calorie count by choosing nutritious foods.
- Drink eight tall glasses of water a day if your health does not restrict the amount of fluid you can take.
- Organize a user-friendly kitchen. Check the back of the planner for simple steps.
- Make a list before you or your assistant go into the grocery store to avoid overbuying or overeating.

March – Physical Activity. Stay Active. Live Longer.

- Go for a walk or “wheel”—start small and pace yourself. Take a stroll every day if you can.
- Find physical activities that you enjoy. Ask your physical therapist or someone else to work with you.
- Sing out loud. It is natural exercise.
- Discover your physical potential. If possible, find a pulse-raising activity such as wheelchair yoga, orchestra conducting, water aerobics, or lifting light upper body weights.
- Ask your personal assistant, friends, or family members to do 10 minutes of range-of-motion exercise on your arms and legs every morning and every night. Make it part of your routine.

April – Alcohol and Drug Abuse: Destroys families, destroys lives.

- Some medications don’t mix—be safe and coordinate between your pharmacist and doctor.
- Don’t self-medicate when you’re in physical or emotional pain. Talk to a pain specialist who is aware of the issues that disabled persons may face.
- Identify the stress that leads you to use alcohol or drugs.
- Read the label—alcohol and some medications don’t mix.
- If you feel your use of alcohol or drugs may be out of control, call the National Drug and Alcohol Treatment Referral Routing Service at 1-800-662-4357.

Monthly Health Themes and Action Steps for Women with Disabilities

May – Mental Health: Lower your stress.

- Check the list in the back of the *Pick Your Path to Health* planner for signs of depression.
- Get together with friends and do something that you are interested in this week.
- Ask for help—it is a sign of strength.
- Tackle a problem one step at a time.
- Develop a support system or choose to join a support group in your community.

June – Responsible Sexual Behavior: Think before you act.

- Communicate with your partner about your abilities and what you enjoy.
- Love yourself for who you are.
- You can enjoy an intimate relationship, with or without sex.
- You have a right to say “no”—it’s your body and your life.
- Know that you have a right to make decisions about who touches your body.

July – Self-Esteem: You matter.

- Make a list of 10 victories you can celebrate in your life.
- You do not need to be defined by your disability—celebrate your abilities!
- Nurturing yourself is not selfish—it’s okay to put yourself first.
- Society’s model doesn’t have to be yours. Look in the mirror and smile—you are beautiful!
- Demand to be treated with respect and dignity, and to speak for yourself. It’s your right!

August – Health Care Access: Your health matters.

- Call the ADA information line at 800-514-0301 (voice) or 800-514-0383 (TDD) for information on accessible health care and services.
- If you are not getting the care you want, ask your health care provider questions and expect answer.
- Remember that you are a partner in your health and health care. Take action and be assertive with your health care provider.
- Trust your instincts—if something does not feel right, talk to your health care provider.
- Take a trusted friend with you to a medical appointment. Ask them to remind you of questions to ask.

September – Prevention: It’s better than a cure.

- Have your blood pressure, cholesterol, and blood sugar checked.
- Eat a well-balanced diet rich in calcium and vitamin D—it can help prevent osteoporosis.
- Ask your health care provider if you should have regular bone density test. It can help your physician assess the health of your bones.
- Schedule an annual mammogram if you’re over 40, and insist on accessible equipment.
- Have your eyes examined by an eye care professional to help prevent glaucoma.

Monthly Health Themes and Action Steps for Women with Disabilities

October – Violence Prevention: Empower yourself.

- Make a list of reliable people to contact in case of emergency. Keep a copy of the list with you and give one to your friends, personal assistant or family members.
- Safety is a must—insist on it in all situations!
- Establish warning signs to alert your neighbors when you need help.
- Remember no one deserves to be abused—call 1-800-799-7233.
- Refusal to provide care by a personal attendant, friend, or family member is a form of abuse. Don't accept abuse!

November – Tobacco Use: Smoking—costly to your LIFE and your wallet.

- Quitting is hard—don't give up after your first try.
- Find a support group in your community. Call 1-800-994-96626.
- Ask your health care provider about different smoke cessation programs that might work for you.
- If you haven't started smoking, don't!
- Make a list of things you can put in your money toward besides tobacco—it's a great motivation to quit.

December – Healthy Relationships: Get Support from Those Who Care.

- Focus on what you value most about your family and friends—and tell them.
- Give a hug or pay a compliment to someone you love.
- Make laughter a habit—spend time being silly, sharing funny stories, and enjoying the company of others.
- Find a way to stay connected—call a friend, write a note, or send an e-mail.
- Join a club or organization that matches your interests.

Monthly Health Themes and Action Steps for Asian and Pacific Islander Women

January – Spirituality: Find the strength within.

- Make a list of 10 victories you can celebrate in your life.
- Take a moment to appreciate your spirit.
- Life is about balance. Take a moment for yourself each day.
- Create a list of all the things you want to do, leaving nothing out, and begin to fulfill your dreams.
- Measure success by how much health, peace, and joy you have.

February – Weight Management: Vital for long-term wellness.

- Use this pocket planner to keep track of the fruits and vegetables you eat daily.
- Steam, bake, or boil your food more often.
- Use home-grown seasonings and herbs to spice up your food.
- Be sure to get enough calcium. Calcium-fortified soy milk and orange juice are great alternatives to milk.
- Water cleanses the body. Carry a water bottle with you every day and refill it at least three times.

March – Physical Activity. Stay active. Live longer.

- Complete your exercise program with a few minutes of meditation to help you focus on the activities ahead of you.
- Start your spring cleaning early; it's a great way to exercise.
- Take a yoga, Tai Chi, or Tae Kwon Do class.
- Keep your walking shoes handy. Go for a walk with a friend everyday.
- Try a new activity this week—take a yoga class, join a sports team, or try salsa dancing.

April – Alcohol Use: Know your limits.

- Don't get in a car with someone who has been drinking, even if it's a family member. Call a cab instead.
- Throw an alcohol-free party. Create some exotic fruit drinks!
- Don't let stress lead you to drink alcohol; it will only make things worse.
- Your children are watching—remember to set a good example.
- Seek counseling for the whole family if a family member is an alcoholic, even if the alcoholic refuses to attend.

May – Mental Health: Lower your stress.

- Make a commitment to keep a journal. This will help you to clarify your thoughts.
- Don't keep stress to yourself—share your worries with your friends and family.
- It's okay to feel depressed sometimes, but if you feel depressed all the time, seek help.
- It's okay to seek counseling. Call 1-800-789-CMHS for treatment and referral information.
- You don't have to be who everyone else wants you to be. Talk to your friends and family about what makes you happy.

Monthly Themes and Action Steps for Asian and Pacific Islander Women

June – Responsible Sexual Behavior: Think before you act.

- You don't need symptoms to be sick. Get tested for STDs.
- Talk to your partner before becoming intimate—it's your choice and right to abstain.
- Don't be afraid to say no—it's your body and your life.
- Abstain from sex or insist on practicing safe sex every time.
- Don't be shy about asking your partner's sexual history—it's your right to be safe.

July – Drug Abuse: Use and you lose.

- Seek help even if you feel helpless. Call 1-800-662-HELP.
- Trust your instincts. If you think your child is using drugs, don't look the other way.
- Don't experiment. You can become addicted even the first time.
- If you are in a relationship with a drug abuser, get help for both of you.
- Never do drugs or drink alcohol when you're pregnant.

August – Health Care Access: Your health matters.

- No matter how busy you are, schedule routine check-ups for you and your family.
- When you don't understand your doctor or your health condition, ask questions and expect answers.
- Tell your doctor in advance if you need translation assistance for your visit, or bring a friend who can translate for you.
- Listen to your body and your intuition. When you don't feel right, seek health care.
- Call 1-800-KIDS-NOW to learn about free or low-cost health insurance.

September – Prevention: It's better than a cure.

- If you aren't feeling well, don't be afraid to have a blood test done. Your body will replenish the blood.
- Get a flu shot, and ask your health care provider if your baby needs one too.
- To help prevent osteoporosis, eat a well-balanced diet rich in calcium and vitamin D, exercise regularly, and don't smoke.
- Make an appointment for a pap test and a mammogram—it could save your life.
- Have your blood pressure and cholesterol checked.

October – Violence Prevention: Empower yourself.

- Engage in a healthy relationship free of violence.
- Violence happens in every culture. Learn about it at www.4woman.gov.
- Learn to protect yourself, take a self-defense class.
- It is never your fault. A person who commits a violent act has no excuses. Call 1-800-799-SAFE for help.
- Help a friend in danger. Tell her to call 1-800-799-SAFE.

Monthly Themes and Action Steps for Asian and Pacific Islander Women

November – Tobacco Use: Smoking—costly to your LIFE and your wallet.

- Make a list of 10 things to do with your money instead of smoking
- Ask your health provider about ways to help you quit smoking.
- Protect your children from secondhand smoke.
- If you don't succeed at quitting the first time, keep trying. See “A Breath of Fresh Air” at www.4woman.gov or call 1-800-994-WOMAN.
- Don't smoke, especially if you're pregnant.

December – Family: Get support from those who care.

- Make your family's health your biggest achievement.
- Honor your ancestors by sharing stories about them at family gatherings.
- Invite your child's friends over to get-acquainted during times of special importance.
- Make bedtime a set time for kids each night. You'll have more time to relax.
- Have dinner together as a family and share what is happening in your lives.

Monthly Health Themes and Action Steps for American Indian and Alaska Native Women

January – Completing the Circle.

- Turn off the TV off. Pass on your own stories instead.
- Drop in on your friends and family to share a laugh.
- Attend a community gathering. Bring your favorite shawl and dance.
- Think of an old family ceremony, and gather your family to do it again.
- Gather your family for a speaking or healing circle. Focus on respect and speak from the heart.

February – Mending and Fixing.

- Organize your family for a regalia mending bee. Pow Wow season is coming!
- Take the kids on an adventure hike. Bring some food for the birds.
- Help a neighbor fix something they haven't had time to get to.
- Be alert for hazards in your workplace and follow all safety rules.
- Read up on good eating habits. Try turning the family on to some healthy snacks.

March – Thinking Spring.

- Build a window box to grow fresh herbs for tasty low-fat recipes.
- Clear out the cookies. Treat your family to a bowl of fresh fruit.
- Walk with Mother Earth and greet the sunrise with a friend.
- Check your house for water leaks, mold, and damp spots.
- Burn your own grass—clear out the cupboards.

April – Planting New Life.

- Involve the family in planting a vegetable garden.
- Eat in beauty, cut back the fat, and think fresh fruits and veggies.
- Try leaner ways to cook your favorite foods.
- Try a new “Three Sisters” recipe. Don't forget the fresh herbs.
- Plant the sacred herbs in your garden and tell your children what they're used for.

May – Celebrating In a New Way.

- Try a new recipe for alcohol-free punch at your next get-together.
- Throw a giveaway ceremony that celebrates the new you.
- Find ways to celebrate that don't involve drinking.
- Don't smoke that cigarette; offer it to the four directions instead.
- Honor a sister for beating an addiction with a dance at the Pow Wow.

June – Making New Traditions.

- Go to a retirement home and visit the Elders.
- Ask an Elder to teach you a song.
- Take part in a sweat with other Native women.
- Visit the local health clinic and find a healer.
- Learn how to make strawberry jam without using sugar.

Monthly Themes and Action Steps for American Indian and Alaska Native Women

July – Rediscovering the Sacred Fire.

- Take a day to reconnect with the voice in your heart.
- Renew your promise to respect yourself and all of your relations.
- Celebrate your country, and your proud heritage.
- Take part in a ceremony that honors the peaceful warrior way.
- Walk in the woods and listen to the trees speak.

August – Harvesting the Rewards.

- Take the children outside on a sunny afternoon. Teach them a new game.
- Throw a feast using all the food from your garden.
- Celebrate your weight loss with a bright new scarf.
- Encourage your teenagers to bring their friends over.
- Can the rest of your garden veggies for winter.

September – Safeguarding the Gift.

- Send your kids back to school properly immunized.
- Have your family's teeth checked and cleaned.
- Take care of your own health; have your annual physical.
- Have you and your family checked for diabetes risk.
- Take an Elder for a mammogram.

October – Honoring the Spirit Within.

- Teach a traditional skill at the community center.
- Support your local drum society.
- Let your voice be heard. Run for local office.
- Learn about Native Justice and how it can heal your family.
- Teach your language at the local grade school.

November – Spreading the Word (Native American History Month).

- Offer to show non-Native children today's Native culture.
- Walk in a sacred place and reflect on your ancestors.
- Teach your children about your grandparents and how they lived their lives.
- Put together a picture album of your family.
- Gather things that belong to your ancestors and write a short story about each piece.

December – Gathering Strength.

- Respect yourself and do things that help to build your self-esteem.
- Listen to your heart when it doesn't feel right. You have the right to say no.
- Learn to protect yourself from STDs and teach your partner.
- Make sure you have your own way home after a party.
- Join a health circle that helps abusers and their victims.

Monthly Health Themes and Action Steps for Women Living in Rural Areas

January – Spirituality: Find the strength within.

- Take a moment to celebrate your spirit. Make a list of 10 victories in your life.
- Measure success by how much health, peace, and joy you have
- Renew your spirit. Close your eyes and focus on something positive each day.
- Do something for yourself: Make a date with a friend, read a book, or learn something new.
- Observe and reflect on the cycle of the seasons while nature enjoys its wintertime sleep.

February – Weight Management: Vital for long-term wellness.

- Eat five servings of fruits and vegetables per day.
- Burn some of the calories you take in—exercise can help you lose weight.
- Use a rack to drain off fat when you broil, roast, or bake. This week, switch to broil instead of pan-frying.
- Switch to low-fat cottage cheese, part-skim milk mozzarella, and other low-fat/nonfat cheeses.
- Start drinking eight tall glasses of water every day. Try adding a twist of lemon to water.

March – Physical Activity. Stay active. Live longer.

- Every little bit helps. Start your exercise routine slowly and build up gradually.
- Invite family and friends to walk with you or walk with your dog. Your walks will be more fun and safer.
- Turn on some music and dance!
- Incorporate exercise into your daily activities. Walk along the sidelines at your child's baseball or soccer practices and games.
- Start a garden, however small, and watch it grow.

April – Alcohol and Drug Abuse: Destroys families, destroys lives.

- Call the National Clearinghouse for Alcohol and Drug Information at 1-800-729-6686.
- Volunteer to be the designated driver.
- Identify the stresses that lead you to drink alcohol and find better ways to cope.
- Take only the indicated amount of prescription drugs. Medicines can also be addictive.
- If you feel helpless, call the National Drug Information Treatment and Referral Line at 1-800-662-HELP.

May – Mental Health: Lower your stress.

- Make a commitment to relax—sit back, take a load off, relax your muscles, and don't feel guilty.
- Talking about problems. It's a good way to relieve stress and find solutions.
- When dealing with a major problem, try to break it down into smaller parts.
- If you're angry, take a deep breath. It will help reduce stress.
- If finding mental health care in your community is a problem, call your state rural health office or county health department.

Monthly Health Themes and Action Steps for Women Living in Rural Areas

June – Responsible Sexual Behavior: Think before you act.

- Get to know your partner's health history.
- Call 1-800-227-8922 for anonymous, confidential information on STDs and prevention methods.
- Make a list of questions for your doctor about sex, and then schedule your next visit.
- Discuss safe sex with your partner before having sex, and then insist on it. No exceptions.
- Know that you have a right to make decisions about who touches your body.

July – Heat Stress Prevention: Keep it cool.

- Drink at least 8 ounces of water every 20 minutes while working in the heat.
- Keep yourself well-ventilated and shielded from heat sources.
- Protect your skin and eyes from the sun's damaging rays. Wear protective sunglasses, a wide-brimmed hat, and lots of sunscreen.
- Monitor your medications. Ask your doctor or pharmacist which medications may increase skin's sensitivity to the sun.
- Become familiar with first aid techniques for heat stress. If you or someone you know suffer from heat exhaustion, cramps, or other signs of heat stress, get medical attention immediately.

August – Health Care Access: Your health matters.

- Use the *Pick Your Path to Health* planner to track your medical appointments.
- Need a ride to the doctor? Share a ride with a neighbor or turn to community groups for help.
- For information about free or low-cost health insurance for kids, visit <http://www.insurekidsnow.gov>.
- Ask your state rural health office about home health care services in your community.
- Ask your provider about free medications or call 1-877-844-8442 for a free information packet.

September – Prevention: It's better than a cure.

- Start your child's health care early by going for prenatal visits.
- Schedule your yearly check-up, including a Pap smear and pelvic exam.
- Have your blood pressure, blood sugar and cholesterol checked.
- Schedule a mammogram if you are over 40.
- If you are over 50, ask your doctor for a flu and pneumonia vaccine this and every fall.

October – Violence and Injury Prevention: Empower yourself.

- Buckle up every time you are in a car or other type of vehicle.
- Store flammable and combustible materials away from sources of heat.
- Wear protective equipment for the head, eyes, ears, nose, hands and feet when operating machinery, or working with chemicals or hazardous materials.
- Make a list of safe people to call in case of an emergency.
- Don't accept abuse! Call the domestic violence hotline at 1-800-799-7233. It's free and confidential.

Monthly Health Themes and Action Steps for Women Living in Rural Areas

November – Tobacco Use: Smoking—costly to your LIFE and your wallet.

- Make a pact with a friend to never start smoking.
- Smoking isn't glamorous—it's deadly. Talk about false advertising with your kids.
- Get children involved in activities that promote healthy lungs like biking and running.
- If you need to quit smoking, see "A Breath of Fresh Air" at <http://www.4woman.gov> or call 1-800-994-WOMAN.
- Make a list of 10 things to do with your money instead of smoking.

December – Family: Get support from those who care.

- Make time to have fun and laugh with your family.
- Surprise a family member or friend with a "just because" gift.
- Plan an activity that maintains family traditions.
- Trade a few hours of child care duties with a friend.
- Compile a family history for your children or grandchildren and tell stories about your childhood.

Overview of Women's Health

Small first steps can start a woman on the path to wellness. But her individual health risks will be determined to a certain extent by her lifestyle and background. While research is uncovering the role of biology, environment, cultural traditions and the interplay of these and other factors, some women's health issues are clear.

<p>Heart Disease is the number one killer of American women.</p>	<ul style="list-style-type: none"> • More women than men die of heart disease. Several risk factors contribute to the likelihood of women getting heart disease including smoking, high blood pressure, high cholesterol, obesity, lack of physical activity, and a family history of the disease. • African American women have the highest mortality rates (155.9 per 100,000) from heart disease of all American women. More than one-third (33.8 percent) of this population has high blood pressure, in contrast to 19.3 percent of white women. In addition, African American women have higher rates of smoking and obesity than white women do.
<p>Cancer is the second leading cause of death among American women.</p>	<p>Lung cancer, the leading cancer killer of women, is on the rise. This increase can be attributed primarily to the increase in smoking among women.</p> <ul style="list-style-type: none"> • White women have the highest mortality rate from lung cancer (27.9 per 100,000) among all women. • African American women have the highest mortality rate from lung cancer (27.7 per 100,000) among all minority groups. <p>Breast cancer is the second leading cause of cancer death among all American women.</p> <ul style="list-style-type: none"> • African American women have the highest rate of mortality from breast cancer of all population groups (27.0 per 100,000).
<p>Stroke is the third leading cause of death for American women.</p>	<ul style="list-style-type: none"> • Stroke occurs at a higher rate among African American and Hispanic women compared with white women. • African American women have the highest death rate from stroke of all women, at 39.6 deaths per 100,000, in contrast to 22.9 for white women.
<p>Diabetes mellitus is the fourth leading cause of death for African American, American Indian/Alaska Native, and Hispanic women.</p>	<ul style="list-style-type: none"> • Diabetes ranks among the top 10 causes of death for all women. • Older American Indian/Alaskan Native women are among the most likely to have diabetes (32 percent of their population). • Older Mexican American women are the second most likely group to have diabetes. They have the highest incidence of this disease among Hispanic women. Almost one-third (30 percent) of these women suffer from the disorder. • Among African American women, 25 percent have diabetes, in contrast to 15 percent of white women. African American women are more likely to be blinded, become amputees, develop end-stage renal impairment, and die from diabetes than white women.

Overview of Women's Health

<p>HIV/AIDS is the second leading cause of death among American women aged 25 to 44.</p>	<ul style="list-style-type: none"> • Newly reported AIDS cases among adolescent and adult women have increased steadily, from 7 percent in 1985 to more than 23 percent in 1998. • The epidemic has increased most dramatically among women of color. Among women with AIDS, African Americans and Hispanics account for more than three-fourths (76 percent) of all AIDS cases as of June 1998, even though they represent less than one-fourth of the U.S. population. • Among African American women between the ages of 25 and 44, AIDS results in more deaths than any other single cause. These women have the highest mortality rate from AIDS (22.0 per 100,000 persons) of all American women. They are 10 times more likely to die from AIDS than are white women. • Hispanic women have the second highest mortality rate from AIDS (7.5 per 100,000). They are almost 3.5 times more likely to die from HIV/AIDS than are white women. In 1996, HIV/AIDS became the second leading cause of death for Hispanic women between the ages of 25 and 44 and the eighth leading cause of death for all Hispanic women.
<p>Alcohol and other drug abuse are serious health concerns for all women.</p>	<ul style="list-style-type: none"> • Women are less likely than men to use or abuse alcohol, however death rates among female alcoholics are 50 to 100 percent higher than their male counterparts. • Among American Indian/Alaska Native women, 2-3 percent consume at least 60 drinks within 30 days. They have the highest mortality rates related to alcoholism of all American women. • Among white women, 17 percent drink frequently as compared to 11 percent of African American women. However, these two populations have the same percentage (2-3 percent) of heavy drinkers, women who consume at least 60 drinks within a month. • Nearly 4.1 million women in this country currently use illicit drugs, and over 1.2 million misuse prescription drugs. • Among all American women, white women have the highest mortality rate (63 percent) from drug-related causes. • Among minority populations, African American women have the highest mortality rate (29 percent) from drug-related causes.
<p>Mental health problems affect large numbers of women each year.</p>	<ul style="list-style-type: none"> • Major depression and dysthymia (a less severe, more chronic form of depression) affect approximately twice as many women as men. An estimated 12 percent of women in the United States experience a major depression during their lifetimes, compared with 7 percent of men. • Hispanic women have the highest lifetime prevalence of depression (24 percent) of all women. Nearly twice as many Hispanic women reported being depressed (11 percent) as African American women (6 percent) and white women (5 percent). • At least 90 percent of all cases of eating disorders occur in women.

Overview of Women's Health

<p>Violence against women is a major public health problem in our country.</p>	<ul style="list-style-type: none"> • More than 4.5 million women are victims of violence each year. Of these, nearly two of every three are attacked by a relative or someone they know. • Among American Indians/Alaska Native women, the rate of violent victimization was 98 per 1,000 females, a rate significantly higher than that found among all other women. • African American women are more likely to be the victims of violent crimes (56 cases per 1,000) than either white women (42 cases per 1,000) or Hispanic women (52 cases per 1,000).
<p>Smoking is the single most preventable cause of death and disease in the United States.</p>	<ul style="list-style-type: none"> • Among women, the use of tobacco has been shown to increase the risk of cancer, heart and respiratory diseases, and reproductive disorders. • As of 1996, roughly 22 million adult women smoked cigarettes. • More than 140,000 women die each year from smoking-related diseases • American Indian and Alaska Native women were the most likely to smoke cigarettes (50 and 60 percent, respectively) of all women. • Among all women, African American women had the second highest percentage of current smokers (27 percent), followed by white women (24 percent).
<p>Overweight and obese women are at increased risk for high blood pressure, heart disease, diabetes, and other health problems.</p>	<ul style="list-style-type: none"> • In 1994, 39 percent of women between 25 and 74 years of age were defined as overweight. • More than half (52 percent) of African American women between the ages of 20 and 74 were classified as overweight in 1994 as compared with more than one-third (35 percent) of white women. • Among Hispanic women, Mexican American women have the highest rate of obesity (50 percent).

SOURCES: Office on Women's Health (OWH) in the U.S. Department of Health and Human Services (DHHS), *Women's Health Issues: An Overview*. 2000; OWH, DHHS, *The Health of Minority Women*. 1999.

National Women's Health Information Center
Office on Women's Health
U.S. Department of Health and Human Services
Phone: (800) 994-WOMAN
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TDD: (888) 220-5446
Web: www.4woman.gov/pypth

Overview of Healthy People 2010

What Is Healthy People 2010?

One tool to help a community create a dynamic vision for its future is Healthy People 2010. Healthy People 2010 is a comprehensive set of health objectives to be achieved over the first decade of the century. It is designed to serve as a roadmap for improving the health of all people in the United States. It includes national health promotion and disease prevention goals, objectives, and measures that can help serve as a model for you to develop your own goals and objectives to improve the health of everyone in your community.

Healthy People 2010 was developed by citizens from throughout the Nation, in a multiyear process that was coordinated by the U. S. Department of Health and Human Services (HHS). For two decades, HHS has used Healthy People objectives to improve the health of the American people

Healthy People 2010 is designed to achieve two overarching goals: (1) to increase the quality and years of healthy life and (2) to eliminate health disparities. (A health disparity is a gap in the health status of different groups of people, in which one group is healthier than the other group or groups.) These two goals are supported by 467 objectives in 28 focus areas

Healthy People 2010 also identifies a smaller set of health priorities that reflect 10 major public health concerns in the United States. These 10 topics highlight individual behaviors, physical and social environmental factors, and important health system issues that greatly affect the health of individuals and communities. Examined together, they constitute a set of "Leading Health Indicators" that provides a snapshot of the health of the Nation and serves to provide guidance and focus for the public, media, and elected officials.

Goal I: Increase Quality and Years of Healthy Life

Healthy People 2010 seeks to increase life expectancy and quality of life by helping individuals gain the knowledge, motivation, and opportunities they need to make informed decisions about their health. At the same time, Healthy People 2010 encourages local and State leaders to develop community wide and statewide efforts that promote healthy behaviors, create healthy environments, and increase access to high-quality health care. Given the fact that individual and community health are often inseparable, it is critical that both the individual and the community do their parts to increase life expectancy and improve quality of life.

Goal II: Eliminate Health Disparities

Healthy People 2010 recognizes that communities, States, and national organizations will need to take a multidisciplinary approach to achieve health equity—an approach that involves improving health, education, housing, labor, justice, transportation, agriculture and the environment, as well as data collection itself. However, the greatest opportunities for reducing health disparities are in promoting community-wide safety, education, and access to health care, an in empowering individuals to make informed health care decisions.

Healthy People 2010 is firmly dedicated to the principle that—regardless of age, gender, race, or ethnicity, income, education, geographic location, disability or sexual orientation—every person in every community across the Nation deserves access to comprehensive, culturally competent, community-based health care systems that are committed to serving the needs of the individual and promoting community health.

Overview of Healthy People 2010

Healthy People 2010: 28 Focus Areas

1. Access to Quality Health Services
2. Arthritis, Osteoporosis, and Chronic Back Conditions
3. Cancer
4. Chronic Kidney Disease
5. Diabetes
6. Disability and Secondary Conditions
7. Educational and Community-Based Programs
8. Environmental Health
9. Family Planning
10. Food Safety
11. Health Communication
12. Heart Disease and Stroke
13. HIV
14. Immunization and Infectious Diseases
15. Injury and Violence Prevention
16. Maternal, Infant and Child Health
17. Medical Product Safety
18. Mental Health and Mental Disorders
19. Nutrition and Overweight
20. Occupational Safety and Health
21. Oral Health
22. Physical Activity and Fitness
23. Public Health Infrastructure
24. Respiratory Diseases
25. Sexually Transmitted Diseases
26. Substance Abuse
27. Tobacco Use
28. Vision and Hearing

In A Snapshot

Healthy People 2010 identifies a set of health priorities that reflect 10 major public health concerns in the United States. These 10 Leading Health Indicators are intended to help everyone more easily understand the importance of health promotion and disease prevention. Motivating individuals to act on just one of the indicators can have a profound effect on increasing the quality and years of healthy life and on eliminating health disparities--for the individual, as well as the community overall.

Subject/Topic	Public Health Challenge
Physical Activity	Promote regular physical activity.
Overweight and Obesity	Promote healthier weight and good nutrition.
Tobacco Use	Prevent and reduce tobacco use.
Substance Abuse	Prevent and reduce substance abuse.
Responsible Sexual Behavior	Promote responsible sexual behavior.
Mental Health	Promote mental health and well-being.
Injury and Violence	Promote safety and reduce violence.
Environmental Quality	Promote healthy environments.
Immunization	Prevent infectious disease through immunization.
Access to Health Care	Increase access to quality health care.

From: *Healthy People in Healthy Communities*, Office of Disease Prevention and Health Promotion, Office of Public Health and Science, Department of Health and Human Services, 2001.

II. Getting Started

A successful program requires active participation from the community and collaboration with other local organizations. Following are sample materials that may be used to enlist the involvement of program participants and partners. Once participants have been recruited, you will need to collect specific information relevant to their involvement with the program. **These materials are included on the diskette so you can tailor them to your program.** A few sheets of letterhead with the *Pick Your Path to Health* logo is included in this resource guide. More will be sent to you under separate cover and can be ordered using the materials order form in the “Program Tools” section.

Participant Recruitment Flyer

This is a flyer you can print as is or customize to generate interest in prospective participants. Be sure the contact person will be available to receive and respond to phone calls from women who are interested in getting involved. If possible, program an outgoing message on the contact phone number with information on the date, time, and location of upcoming program meetings and/or events, along with particular items women will need to bring or wear (e.g., walking shoes, clothing comfortable to stretch in, a favorite low-fat recipe, and so on).

Letter to Potential Participants

This letter is to be customized and sent to all potential participants detailing the program’s goals, level of expected participation by participants, and how the program will be structured. Coaches can add specific program information they wish potential participants to know. Potential participants should be encouraged to begin to think about their health goals and to contact the Coach or other contact person with any concerns or questions.

Letter to Partners

This letter can be printed on the *PYPH* letterhead. Tailor the letter to each prospective partner, highlighting specific ideas for collaboration. For example, in planning a spirituality-themed event, you may invite a popular yoga instructor to conduct a free workshop on meditation and movement. Appeal to partners’ expertise in developing activities that will encourage participation.

Welcome Letter/Information for Participants

This letter can be printed on *Pick Your Path to Health* Letterhead. It should be sent following enrollment to welcome each participant and provide a brief introduction to the program. It may be useful to tailor this letter to the specific goals of your program, what the program’s expectations are, and include information about the event schedule, including the date, time, and location of an upcoming meeting. All necessary paperwork – medical agreement, contract of partnerships, and so on should be included in this welcome packet.

Contract of Partnership

This Contract of Partnership outlines the individual goals of each participant at program outset. During the course of the program, coaches and participants may refer to the Contract to evaluate progress or revise goals. Coaches may customize this contract as needed.

Medical Agreement

The Coach should go over this medical agreement with all participants. When appropriate, each woman should be required provide a completed agreement signed by their physician prior to initiation of program participation.

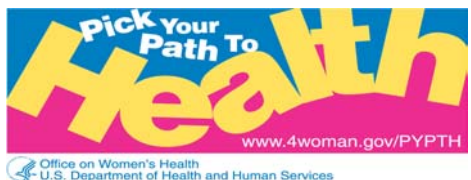
II. Getting Started

Photograph Release Form

As Coaches document the journey of participants using the Internet-based mapping program, they may want to record the successes of the participants in the program in other ways. As part of the program, Coaches will be invited to submit stories of women or groups of women participating in the program which will be included in the *Pick Your Path to Health* Newsletter or other Office on Women's Health publications. We would also welcome photographs of participants. Before taking photographs, it is important to get a release form signed by the participants indicating that they agree to the use of their photos by the Office on Women's Health in various contexts.

Checklist for Coaches

This is a checklist for Coaches to make sure they have all the necessary materials they need and are prepared to begin the program.



Ladies, Want a *Path to Health* that is Easy and Fun?

Busy? Tired? Not enough time to take care of yourself? We understand how you feel. Why don't you,

Let Us Coach You!



Pick Your Path to Health is a new community-based program that will provide individual and group assistance on a variety of health goals, including:

- Spirituality
- Weight Management
- Physical Activity
- Alcohol Use
- Mental Health
- Responsible Sexual Behavior
- Drug Abuse
- Health Care Access
- Tobacco Use
- Disease Prevention
- Violence Prevention
- Family

The Path to Good Health is achieved by taking small, easy steps along the way - it's easier than you think!



You may be paid a small stipend for your participation. If you are interested in participating in this program, contact us:

Partner Recruitment Letter

Print on PYPTH Letterhead

Dear *Partner*:

We are very excited about a new *Pick Your Path to Health* Community Program. It is sponsored by the Department of Health and Human Services' Office on Women's Health. Our goal is to work with women, individually and in groups, to achieve a variety of goals to improve their health and provide them with practical, lifelong tools to put them on a path to good health.

As part of our program, we want to invite agencies and organizations, such as yours, to collaborate with us to give these woman the best opportunity to learn about their health options and to have the leaders in the community be a part of their success.

We are enclosing more information on who we are and are inviting you to be our program's partner by collaborating in a variety of ways: assisting with organized events, participating in workshops, providing information, acting as guest speakers, and so on.

We hope that you will join and collaborate with us on this empowering process. If you any questions, please feel free to contact _____ (**enter contact name**) at _____ (**phone number**). We will be following with you shortly to assess your level of interest and how you may be able to collaborate with us.

Sincerely,

Coach's Name _____

Program _____

Telephone Number () _____

Potential Participants Letter

Print on PYPTH letterhead

Today's Date: [insert]

Participant Address:
[enter]

Dear ____ [enter] _____:

We are very excited in your interest in participating in the *Pick Your Path to Health* Community Program. This program is based on the *Pick Your Path to Health* national, public education campaign from the Department of Health and Human Services' Office on Women's Health. Since its launch in May 2000, the *Pick Your Path to Health* campaign has brought positive health messages to women in communities all over America. The response has been overwhelmingly positive. Women especially like the suggested weekly action steps designed to fit into busy lifestyles.

Let us give you some background on our program:
[insert]

The structure of our program and how we will be assisting you to reach your health goals is as follows:
[insert]

As a participant, you will be expected to:

[fill in program and coach's expectations]

We look forward to working with you and are confident you will benefit from this program in achieving your health goals. Our program will start on **[enter date]**. If you have any questions or concerns please contact _____ at _____ (phone number).

Participant Welcome Letter

Print on PYPTH letterhead

Date: [insert]

Address
[insert]

Dear [insert participant's name]:

Welcome! We are very excited about your involvement with the *Pick Your Path to Health* Community Program based on the *Pick Your Path to Health* national, public education campaign. Since its launch in May 2000, the campaign has brought positive health messages to women in communities all over America and the response has been overwhelmingly positive. Women especially like the suggested weekly action steps designed to fit into busy lifestyles.

Using the action steps and some of your own, [Name of your organization] will work with you to tailor a program to achieve your health goals. Your involvement presents a unique opportunity to discover the benefits of choosing your own path to a healthier and more fulfilling life.

The program will consist of the following activities/details [add or delete as needed]:

- ◆ A Coach who will work with you to set and achieve your personal goals
- ◆ Workshops and other health-related events
- ◆ Individual and group participation
- ◆ Educational and resource materials on a variety of health topics

To begin your program, please report to [insert coach's name] at [insert place/address where program will first meet] on [enter date] at [enter time]. At that time, we will meet to discuss your individual health goals, have you fill out necessary administrative paperwork (including how you will be paid for your participation).

We look forward to working with you and wish you much success in achieving your health goals. If you have any questions or concerns, please contact your Coach, **[insert coach's name]** at **[insert contact phone number]**. Your coach will be your main point of contact and is here to help you.

Your path to good health is now underway, and we're pleased we will be there to guide you. It IS easier than you think!

Contract of Partnership

Your participation in the *Pick Your Path to Health* Community Program is a partnership between you (to make healthful lifestyle choices) and us (to guide and “Coach” you on your path to health). Your commitment is reflected in the establishment of your personal goals for this program and in acknowledging your commitment to participate as fully as possible. Although our goal is to assist you in obtaining your desired mental and physical health goals, our primary role is to serve as a resource for health information and provide structure and facilitation toward your goals.

As a partner, please understand that we do not diagnose medical conditions nor suggest any kind of treatment for any medical condition. We are also not to be taken as a substitute for medical care or regular scheduled medical appointments. Additionally, we do not accept any responsibility for your health status. If you have any medical conditions that may affect or preclude your participation (i.e., over the counter and prescribed medications, health conditions, physical limitations, etc.) you must inform us and get permission from your physician, if necessary.

By signing below you are acknowledging your dedication to the program and goals established between you and your coach.

Participant signature: _____

Date: _____

Coach's signature: _____

Date: _____

Medical Agreement

As a participant in the *Pick Your Path to Health* Community Program, our goal is to assist you in making changes in your lifestyle to obtain your desired mental and physical health goals. Before you begin the program, we ask that you notify us of any medical conditions that may affect your participation (i.e., use of over the counter and prescribed medications, health conditions, physical limitations, etc.) If you have any medical conditions or take any medications, you must get permission from your physician or health care provider to participate in this program and furnish us with any necessary information.

We do not accept any responsibility for your medical status (illness, injuries, hospitalizations) during your participation in this program. If at any time your health changes during your participation in the program, it is your responsibility to inform us and your physician or medical caregiver. If we feel your health status cannot allow you to safely participate in this program, we will immediately inform you that your participation officially been terminated.

By furnishing the information below and signing at the bottom, you agree to all of the above.

Your name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____

Physician's Name: _____

Address: _____

Phone: _____

Medical status (list any and all medical conditions, medications): _____

Signature: _____ Date: _____

I have determined that _____ is medically able to participate in this program with: [] no special accommodations [] with the following accommodations, please list:

Physician Name: _____

Phone: _____

Signature: _____ Date: _____

Photograph Release Form

For valuable consideration received, I hereby give the Office on Women's Health (OWH) the absolute, irrevocable right and permission, with respect to the photographs that have been taken of me or in which I may be included with others:

To use, reuse, publish and re-publish the same in whole or in part, individually or in conjunction with other photographs, in any medium and for any purposes, including (but not by way of limitation) illustration, promotion and advertising for the government.

I hereby release and discharge OWH from any and all claims and demands arising out of or connection with the use of photographs, including any and all claims for libel.

This authorization and release shall also ensure to the benefit of the legal representatives, licensees and assigns of OWH as well as other government agencies.

I am over the age of twenty-one, or my guardian is signed. I have read the foregoing and fully understand the contents thereof.

Name and Address:

Signature:

Date:

Witnessed by:

Checklist for Coaches

Before you begin your program, check the items below to make sure you have everything that you need.

Getting Started

Completed

- Did you develop your work plan? ☐
- Have you submitted the work plan to your Program Director? ☐
- Do you feel you are well trained on how to use the journey mapping system? ☐
- Are you prepared to start documenting individual women's successes to submit them to the Regional Office? ☐
- Do you have necessary signed forms from all the participants? ☐
 - Contracts of Partnerships ☐
 - Medical Agreements ☐
 - Photograph Releases ☐
- Did you go over goals with each participant? ☐
- Did you complete the coaches' baseline evaluation form? ☐
- Do you have all the materials you need? ☐
 - Journals, postcards, day books, posters, planners? ☐
 - Roles and responsibilities for coaches? Tips for coaches? ☐
 - Suggested activities, sample articles, goal sheets for participants? ☐
 - Order forms to request more materials? ☐
- Anything else you need to get started? If so, list below and call your Project Officer. ☐

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IV. Administration and Evaluation

This section contains information on items that you will need to submit as part of the contractual obligations for this program.

Progress Reports

This section details the types of information that coaches and program administrators will need to collect throughout the program and the frequency for submission of these reports.

Evaluation

This section describes how the effectiveness of the program will be determined through the use of a unique internet-based program, as well as from written feedback from both the Coaches and the participants.

◇ **Journey Mapping Instructions**

This gives detailed instructions for coaches and participants on how to use the internet-based journey mapping program.

◇ **Coach Pre-Program Assessment Form**

This form assesses the Coaches' expectations and their readiness to begin the program. The Coach should fill out one of these at the beginning of each new program session.

◇ **Coach Follow-up Evaluation Form**

This form is the Coaches' evaluation on the success of the program. The Coach should fill out one of these at the end of each separate program session.

◇ **Participant Feedback Form**

This form solicits participant's feedback on the success of the program and how effective it was in helping them with their health goals.

Progress Reports

Progress Reports

The contractor will be required to provide a detailed work plan, quarterly reports and a final report as described in the schedule of deliverables. These reports will provide a historical record of project activities and should be as objective and unbiased as practical with a special focus on constructive criticisms and recommendations for improvement that might enhance implementation of future PYPTH programs.

Work Plan

Contractors must prepare and submit a detailed work plan within thirty days of contract award to the Project Officer (OWH Regional Office). The plan should include an explanation of the contractor's approach to implementing the program, workshop and event content, length of workshops and events, information on educational and resource materials for each PYPTH theme, community resources, program personnel, and program participants including information on the number of program participants, as well as information on journal recording, program follow-up, and program evaluation.

The Project Officer will arrange a teleconference or face-to-face meeting to discuss the work plan, timelines, tasks, and budget.

Quarterly Reports

Contractors will furnish quarterly progress reports detailing current status of individual tasks related to program design, program implementation and program evaluation. The report shall be narrative in form and shall include the following information:

- A summary of progress in program design, implementation and evaluation to include contractor's experience to-date in attempting to implement the program, the percentage of participants continuing to stay with the program, and the anticipated beginning and completion date for individual tasks.
- Participant feedback to-date on progress in implementing action steps based on the participant feedback form and verbal feedback received by coaches from participants. Coaches will have the opportunity to record oral feedback in an OWH-provided feedback database, called *Journey Mapping*. Contractors should ensure anonymity of participants
- Person hours of time and dollars expended on individual tasks for the present reporting period and year to date by type of personnel utilized (Coach, Speakers, Program Manager).
- Section on Current/Anticipated Problems/Issues and Impact on Cost and Completion Date.

Final Report

The Contractor shall submit a draft of the final annual report one month before the end of the contract period. The Project Officer will respond to the draft within two weeks.

A final narrative report assessing the efficacy of implementing the PYPTH model in a community setting and using the PYPTH program to motivate, educate, and empower women to take steps toward health improvement shall be provided. The report must document significant work activities during the entire length of the contract and include participant feedback. Contractors shall include the actual participant feedback form filled out by participants and take steps to ensure anonymity of participants. This report will provide a historical record of major work activities and should be as objective and unbiased as practical, with a special focus on constructive criticisms and recommendations for improvement that might enhance implementation of future PYPTH programs.

Evaluation

Journey Mapping

Journey Mapping is a unique, one-of-its-kind tool that is ideally suited for meeting multi-site reporting requirements. The tool is Internet-based and allows coaches and women at each site to be provided with unique passwords and be positioned to log in and document their unique experiences as they occur. Additionally, the application offers instant reporting capabilities. This will allow program directors to track progress in near real-time, glean best practice examples, and quickly share findings across all sites.

The Office on Women's Health will encourage each community-based program to use this customized, Internet-based application to assist them in mapping the journey of women who participate in the programs. The contractor, Pacific Institute for Research and Evaluation (PIRE), will be responsible for setting up users at each site, training them in journey mapping, and providing unlimited off-site support for the entire year to ensure optimum use of the application.

Coaches Assessment

The Office on Women's Health would like to obtain coaches' feedback at the beginning and end of the program on their expectations from the program, whether or not the women will be able to change health behaviors, implement action steps, or reach their goals and to specify if goals were partially reached. Written feedback should be obtained from coaches using the Coach Pre-Program Assessment Form and the Coach Follow-Up Evaluation Form. Coaches may record participants' progress through the journey mapping system.

Written Participant Feedback

It is the responsibility of the coach to obtain written participant feedback at the end of the program on whether or not the women were able to change health behaviors, implement action steps, or reach their goals and to specify if goals were partially reached. Written feedback should be obtained from participants using the Participant Feedback Form. This form should be given to every participant who completes (or doesn't complete for whatever reason) the program.

III. Program Tools

This section provides coaches with program suggestions and useful implementation tools. The materials are generic for any health theme and can be duplicated as handouts.

Roles and Responsibilities of Coaches

This handout reviews the unique role of the program coach and helps you plan your work approach.

Tips for Coaches

This document gives tips for coaches on their role and how to work with the program participants.

Suggested Activities

This is a list of activities for each monthly health theme from the *Pick Your Path to Health* campaign that coaches may want to use or adapt to fit their program.

Goal Sheets

These worksheets are created to reflect the 12 monthly health themes that coaches can duplicate for women to use to help them develop their personal health goals. Two additional sheets specifically for women who live in rural areas and women with disabilities are also included to reflect the particular needs of these populations. If needed, Coaches can decide to include these or not depending on the make-up of the women in their specific programs.

Sample Articles

This section showcases samples of the *Pick Your Path to Health* articles by population. If interested, women can fill out the request form to receive them on a monthly basis directly from the *PYPH* campaign. You can also incorporate them into a community or program newsletter.

Certificate of Completion

Upon successful completion of the program, participants will receive a colorful certificate that will be signed by both the Coach and Program Administrator. A sample is included in the back pocket of the notebook. This certificate can be completed and awarded at the program site either by using a typewriter to enter the personal information directly on the certificate. **Coaches will order the amount of certificates needed once participants are enrolled using the *Coaches Kit: Materials Order Form*.** An electronic template is currently under development to enable programs to print directly onto the certificates using their computer. More information and directions will be sent once this template has been finalized. (A sample copy of the certificate is in the back of this Resource Guide)

Monthly Article Email Request Form and Coaches Kit: Materials Order Form

This is the order form for women or programs interested in receiving the *Pick Your Path to Health* monthly articles by email. Also in this section is the *Coaches Kit: Materials Order Form* that Coaches use to order materials such as pocket planners, posters, postcards, and listserv cards as needed. The materials are of high-quality design in full color and offer health messages women can incorporate into their daily lives.

III. Program Tools

Other items you will receive as program tools that will be sent under separate cover:

The *Pick Your Path to Health* campaign offers an array of high-quality materials to support your program. Each program coach has the opportunity to order these materials. Keep in mind that you will need materials not only during the implementation phase but also throughout the contract period. As a starting point, familiarize yourself with each tool and think of ways to make the most of each item. All materials have been created to assist women achieve their goals for better health which means that each one of them can be easily incorporated into your activities.

- **2003 Pocket Planners:** 12-month planners that offer suggested weekly action steps based on the monthly *Pick Your Path to Health* campaign themes. Each planner includes a comprehensive list of health resources in the back section. (Six populations featured). (Sample of one enclosed in back pocket of this Resource Guide).
- **Promotional Gifts:** Fun and useful promotional items for participants—sports bottle; tote bag; and sun visor.
- **2003 Women's Health for the Homefront Daybook:** This daybook contains a wealth of up-to-date information on good health practices and is a must have on resources for participants. Included in the daybook are sections on: "Know When to See Your Health Care Provider," "Symptoms of Serious Health Conditions," "Preventive Screening Tests," "How to Get a Second Opinion," and much more.
- **Leading Women on the Path to Good Health/PYPH Letterhead:** The program will receive color letterhead that can be used when sending out personalized letters to participants and partners. A sample of one is enclosed in the back pocket of this Resource Guide. Programs can order more letterhead as needed or photocopy it as well in either color or black and white.
- **Listserv Cards:** Sign-up cards for participants who would like to receive weekly health tips via email from the *Pick Your Path to Health* campaign. (Sample enclosed in back pocket of this Resource Guide).
- **Postcards:** Coaches can give or mail to participants as reminders, and encouragement pieces to keep them on their goals or congratulate them on a job well done. (Sample enclosed in back pocket of this Resource Guide).
- **Posters:** High-quality, full color *Pick Your Path to Health* posters that can be displayed in your program, or other community organization that supports your program or promotes health issues. (Sample enclosed in back pocket of this Resource Guide).

Roles and Responsibilities of Coaches

As a *Pick Your Path to Health* (PYPTH) coach and mentor, you play a unique and pivotal role in leading women on the path to good health. You will engage, motivate, educate and empower women to make simple steps to improve their health in a variety of areas.

Consider the characteristics of a coach versus a mentor that you will blend in your position.

	Coach	Mentor
Focus	Performance	Individual
Role	Specific agenda	Facilitator without agenda
Relationship	Comes with the job	Self-selecting
Source of influence	Position	Perceived value
Personal returns	Teamwork/performance	Affirmation/learning
Arena	Task related	Life

Your role as a coach and mentor will involve focusing on the women and their individual needs in the program, and supporting their long-range health goals. You will also assist them with developing concrete, obtainable goals and help them monitor their progress.

In summary, a mentor has a personal interest in a participant – a “friend” who cares about them and their long-term development. A coach develops specific skills and strategies to achieve the goals, overcome challenges and produce the expected outcomes of the program’s participants.

For your consideration, here are select descriptions of what a successful coach and mentor do. You undoubtedly can think of more or add to this list, but this is to get you started on thinking about your role and how you want to establish a relationship with the women you will coach.

- ◆ Assist with developing and setting attainable goals
- ◆ Empowers others
- ◆ Challenges women to do their best
- ◆ Allows women to make their own decisions
- ◆ Maintains a results orientation approach
- ◆ Keeps women focused on the goals ahead
- ◆ Supports women in working out problems for themselves
- ◆ Offers emotional encouragement and instills confidence
- ◆ Guides and teaches the learning of skills and strategies
- ◆ Offers constructive feedback
- ◆ Communicates in a variety of styles

Tips for Coaches

As a *Pick Your Path to Health* (PYPTH) coach, you play a pivotal role in leading women on the path to good health. You will engage, motivate, educate and empower women to make simple steps to improve their health in a variety of areas. Here are some tips to help you succeed.

Establish rapport. Make sure that participants are comfortable in your environment. Tell them about you and show a genuine sense of curiosity and interest in their situation.

Focus on the person's goals, not yours. Try to help the participant move toward establishing her own meaningful goals and she will be more likely to achieve them.

Clarify roles. You are the listener, helper, and motivator. Your role is to help identify strengths and help participants create a plan to reach their own personal goals.

Make sure the person is fully engaged. Participants who feel awake, interested, like part of your team, and are actively participating in interactions are more likely to succeed.

Make suggestions based on each individual's strengths . Every PYPTH participant has unique strengths to help her achieve her goals. Help her see those strengths and you will inspire her to reach her potential.

Focus on what works. You can prevent lapses from becoming collapses by focusing on what is going right and looking for lessons learned. Don't simply urge more willpower.

Listen well. Don't ignore obstacles and unmet needs. Listen actively to the participant's concerns and appreciate their ambivalence. Try to summarize what they say to you, and ask good questions.

Call 1-800-994-WOMAN. The National Women's Health Information Center can provide you with free information and resources for your participants. To learn more go to www.4woman.gov/pypth and click on community programs.

Suggested Activities

The following are suggestions or ideas that you may want to incorporate into your program design for each of the 12 monthly health themes. These are just a few suggested activities and by all means do not exhaust all the possibilities at your disposal.

January – Spirituality: Find the strength within.

- Ask the women to come up with a creative or unique way to show how they find the strength within and share it with their group members.
- Ask chaplains at local hospitals, universities, and military bases to participate in a free seminar on "Women's Health and Spirituality".
- Hire a yoga instructor for an introductory session.
- Plan programs on meditation or other activities that reduce stress.
- Have the women keep a journal in which they take some time each day or each week to reflect and write down what they've done to embrace their spirituality.

February – Weight Management: Vital for long-term wellness.

- Sponsor a lunchtime potluck where each member brings a healthy dish or item to share.
- Start a listserv and e-mail weekly menus and words of encouragement to participants .
- Have a nutrition expert give a workshop on food: serving sizes, low-fat alternatives to different foods, options for eating out, how to cook foods in different ways, how to choose fresh, ripe food. Plan a field trip to a local farmer's market to discover fresh foods never considered.
- Take a field trip to the grocery store to shop or give guidance on healthy, low cost shopping, giving particular emphasis on what to buy or not buy for particular health conditions (diabetes, high blood pressure, and so on.)

March – Physical Activity: Stay Active. Live Longer.

- Offer a "healthy heart" aerobics or stretch class to women through a local gym.
- Start a "women's walkers club" .
- Sponsor a women's community sports team .
- Invite a fitness expert to speak about the importance of: hydration, injury prevention, strength training for women, and alternatives and suggestions for using common household items for free weights.

April – Alcohol Use: Know your limits.

- Invite a speaker from a service/support organization to speak on: affects of alcohol on the body, signs of alcoholism, where to get family support, resources in the community.
- Incorporate techniques on stress reduction as part of activity.
- Have a contest for the most creative non-alcoholic drink. Have a group where everyone would make theirs and have the group judge which is the best for a prize.

May – Mental Health: Lower your stress.

- Establish a support group for women that focuses on stress.
- Conduct depression screenings for a group of women and give continued support.
- Provide literature on mental health topics.
- Have students of massage or other professional give instruction on how to give massages; have women get a seated massage.

Suggested Activities

June – Responsible Sexual Behavior: Think before you act.

- Provide information on contraceptives and safe sex.
- Have a nurse practitioner or other health professional speak on what to expect at a gynecological exam and walk participants through the process of a mammogram and pap smear and what each exam means, the results, etc.
- Have an expert talk about STDs and HIV – prevention and the signs.
- Have the group create a community campaign aimed at teens and young adults on the benefits of safe sex.

July – Drug Abuse: Use and you lose.

- Invite a drug abuse support organization speaker to talk with group on services and supports in the community, signs of drug addiction and what to do if you live with someone who has a drug problem.
- Have a medical expert talk about the proper use and dangers of prescription drugs and what to ask your doctor about your prescriptions.
- Identify what family supports are available.

August – Health Care Access: Your health matters.

- Hold or connect group members with a women's health fair.
- Invite insurance companies to sponsor a general "benefits workshop" on what to look for in a health plan, what kind of coverage is right for your family, etc.
- Have a physician speak on how to find the right primary care physician – questions to ask. Make sure the physician is of the same cultural background as the women, if possible.

September – Prevention: It's better than cure.

- Partner with a women's clinic to offer free or low-cost immunizations.
- Hold an informational workshop on adult immunizations.
- Hold a immunization recordkeeping group: everyone create an immunization folder/chart that identifies all their immunizations and identifies ones they currently need.
- Identify community health screenings – diabetes screening, cholesterol, and so on.

October – Violence Prevention: Empower yourself.

- Encourage volunteer participation at local women's shelter.
- Sponsor an "open house" at your organization with representatives from local women's shelters and help publicize their services.
- Have each participant write up their emergency plan to leave a violent situation.
- Have women identify or begin to set up a support system for themselves.

November – Tobacco Use: Smoking—costly to your LIFE and your wallet.

- Start a smokers support group to give support to members who want to quit.
- Hold an educational seminar on second hand smoke.
- Have group keep track of number of cigarettes smoked in a week and tally up cost; then come up with ways they could spend the money saved on not smoking and go for it.

December – Family: Get support from those who care.

- Offer story-telling sessions where older members of the family share stories with community members and ask the local cable access television station to film it.
- Organize a family picnic day in your group of women.
- Have group create a family tree and look into their family history to share with their children.

Goal Sheets

Spirituality: Find the strength within

My goals for spirituality are:

✓ Take a moment to celebrate my spirit

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✓ Believe in myself—write at least of five things I do best

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✓ Measure success by how much health, peace, and joy I have

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✓ Make a list of victories I can celebrate in my life

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✎ Add more goals below:

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Goal Sheets

Weight Management: Vital for long-term wellness

My goals for weight management are:

✓ Carry a water bottle with me and will refill at least three times

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✓ Use the *Pick Your Path to Health* pocket planner to keep track of the fruits and vegetables I eat daily

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✓ Use home grown seasonings and herbs to spice up my food

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✓ Try baking, boiling, or steaming my food instead of frying it

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✓ Exercise to burn some of the calories I take in

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✎ Add more goals below:

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Goal Sheets

Physical Activity: Stay active. Live longer

My goals for physical activity are:

✓ Go for a walk with a friend everyday

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✓ Put on some music and dance

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✓ Keep my walking shoes handy

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✓ Start to exercise gradually and work my way up

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✎ Add your more goals below:

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Goal Sheets

Alcohol Use: Know my limits

My goals for being aware of my alcohol use are:

✓ Stop at two drinks to avoid behavior I may regret

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✓ Take steps not to get pregnant if I've abused drugs or alcohol in the past year

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✓ Take a girlfriend's keys and don't let a friend drive drunk

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✓ Seek counseling if I or a member of my household has problems with alcohol

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✓ Throw alcohol-free parties

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✍ Add more goals below:

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Goal Sheets

Mental Health: Lower my stress. Improve my health

My goals for improving mental health are:

✓ Protect my last good nerve. Try deep breathing, massage, meditation, prayer, and exercise

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✓ Don't sweat the small stuff: choose the really necessary things that need to get done today

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✓ Get together with my girlfriends at least once a month to laugh, cry, and support one another

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✓ Won't be afraid to seek counseling

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✎ Add more goals below:

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Goal Sheets

Responsible Sexual Behavior: Think before I act

My goals for responsible sexual behavior are:

✓ Don't be afraid to say "no!" It's my body and my life

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✓ Abstain from sex or practice safe sex every time

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✓ Get tested for HIV/AIDS

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✓ Get tested for STDs regularly even if I have no symptoms

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✓ Ask my partner about his sexual history

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✎ Add more goals below:

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Goal Sheets

Drug Abuse: Use and I lose

My goals for preventing drug abuse are:

✓ Don't experiment and learn more about drug addiction

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✓ Don't take medications prescribed to others

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✓ Seek help if I am in a relationship with a drug abuser, and get help for both of us

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✓ Give addicts the support they need to quit

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✎ Add more goals below:

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Goal Sheets

Health Care Access: My health matters

My goals for improving health care access are:

✓ Schedule routine check-ups for myself and my family

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✓ Make a list of questions or concerns to discuss with your doctor

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✓ Speak up if I don't understand my doctor's instructions

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✓ Learn more about government-sponsored low-cost or free health insurance programs

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✎ Add more goals below:

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Goal Sheets

Prevention: It's better than a cure

My goals for prevention are:

✓ Have my blood pressure, blood sugar, and cholesterol checked

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✓ Ask my local pharmacist where to get a flu shot

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✓ Schedule a pap test and pelvic exam

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✓ To help prevent osteoporosis, eat a well-balanced diet rich in calcium and vitamin D, exercise regularly, and don't smoke

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✎ Add more goals below:

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Goal Sheets

Violence Prevention: Empower myself

My goals for violence prevention are:

✓ Make a list of safe places where I can go to protect myself from abuse

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✓ Empower myself! Sign up for a self-defense class

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✓ Always stay in touch with friends and family

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✓ Won't keep abuse a secret and will seek help

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✎ Add more goals below:

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Goal Sheets

Tobacco Use: Smoking—costly to my life and my wallet

My goals for avoiding or quitting smoking are:

✓ Make a list of 10 things to do with my money instead of smoking

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✓ Create a no-smoking rule in my home

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✓ Find a support program in my community to help me stop smoking

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✓ Make a pact with myself to never start smoking or to stop smoking

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✎ Add more goals below:

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Goal Sheets

Family: Get support from those who care

My goals for family are:

✓ Have fun with my family this week

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✓ Ask family members for help if family responsibilities are causing me stress

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✓ Plan a funny-family-story night and invites aunts, uncles, and grandparents

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✓ Plan a family picnic

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✓ Make bed time a set time for kids each night

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✎ Add more goals below:

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Goal Sheets

Heat Stress Prevention: Keep it cool

My goals for heat stress prevention are:

✓ Drink at least 8 ounces of water every 20 minutes while working in the heat.

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✓ Keep myself well-ventilated and shielded from heat sources.

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✓ Protect my skin and eyes from the sun's damaging rays.

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✓ Monitor my medications for skin sensitivities to sun exposure.

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✓ Learn first aid techniques for heat stress.

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✍ Add more goals below:

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Goal Sheets

Additional Goals for Women with Disabilities

My goals for better health are:

✓ Eat 5-6 small, well-balanced meals a day—make every calorie count by choosing nutrition foods.

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✓ Don't self-medicate when I'm in pain. Talk to a pain specialist who has an awareness of issues that persons with disabilities may face.

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✓ To celebrate my abilities—not to define myself by my disability.

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✓ Call the ADA information line at 800-514-0301 (voice) on accessible health care and other services.

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✍ Add more goals below:

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SAMPLE MONTHLY ARTICLE – Asian and Pacific Islander Women

Pathways to Better Health: A Feature of the Pick Your Path to Health Campaign Diabetes in Asians

Did you know that diabetes is the fifth leading cause of death for Asian and Pacific Islander Americans aged 45 to 64?

Did you know that being overweight, having high blood pressure, or being physically inactive can increase your risk for developing diabetes?

When it comes to diabetes, what you know can help save your life.

Diabetes affects more than 16 million people in the United State and it is the main cause of kidney failure, amputations of the foot and leg, adult blindness, and a major cause of heart disease and stroke. Death due to diabetes is about three times higher for Asian and Pacific Islander Americans than whites.

What is diabetes?

Diabetes happens when there is too much sugar in your blood. Normally, when we eat, food is converted to sugar, which enters the bloodstream to help fuel the body's cells. With diabetes, the sugar is not used properly and it builds up in the blood. In time, this sugar buildup can damage the heart, kidneys, eyes, nerves, and blood vessels.

Type 2 diabetes makes up about 95 percent of all diabetes cases. It is more common in adults over age 40 and is strongly associated with obesity, physical inactivity, family history of diabetes, and racial or ethnic background.

What you don't know can hurt you

Many people have diabetes and don't know it. In a University of Washington study, 23 percent of Asian and Pacific Islander Americans were found to have diabetes and not know it. The study found that 17 percent Chinese, 23 percent Japanese, 25 percent Filipino, and 28 percent Korean Americans did not know they had diabetes.

According to the National Diabetes Education program, the chances of Asian Americans developing diabetes have increased as their food choices have changed. Instead of their traditional plant- and fish-based diets, they are choosing foods with more animal proteins and fats, and more processed carbohydrates. In addition, they have become less physically active.

Diabetes may seem like a silent disease, but there are some signs to look for such as: unusual thirst, urinating often, feeling very tired or ill, losing weight without trying, having sores that are slow to heal, and having blurry eyesight.

SAMPLE MONTHLY ARTICLE –

Asian and Pacific Islander Women

A history of high blood pressure, heart attack, and family history of diabetes are early indicators, says Dr. Wilfred Fujimoto, a leading diabetes researcher at the University of Washington. “Asians are at a greater risk if a parent, brother, or sister has a history of diabetes, more so, if both parents have it. It’s important to tell your family members if you have the disease so that they can take steps to prevent it.”

How to prevent diabetes

You can reduce your risk for diabetes. A recent study by the National Institutes of Health (NIH) found that lifestyle changes can reduce the risk of getting diabetes in both men and women. Participants in the Diabetes Prevention Program (DPP) study reduced their risk of getting type 2 diabetes by 58 percent simply by doing physical activity 30 minutes each day and by adopting a low-fat diet.

You can choose simple physical activity that fits into your daily routine. For example, most participants in the DPP study chose walking as their exercise of choice and lost 7 percent—or 15 pounds—of their body weight. You can also follow the Asian traditional diet, which is low in saturated fat and high in complex carbohydrates.

Getting to know your BMI can also help. People with a body mass index (BMI) of 30 or greater are at five times higher risk of diabetes than people with a BMI of 25 or less.

To calculate your BMI, visit the NIH Web site at www.nhlbisupport.com/bmi/ or do it with a calculator. Multiply your weight by 703 and then divide your answer by your height in inches multiplied by your height in inches. “A BMI of 25 or more is considered overweight,” says Dr. Fujimoto. “For Asians, a normal BMI should be about 23, because the risk of disease increases at a BMI of 23.”

The lifestyle changes recommended to avoid diabetes are simple and doable. Start today. Prevent diabetes before it happens to you. It will help keep you on a path to better health.

- Talk to your doctor about your risk for diabetes.
- To learn more about how to prevent diabetes, visit the National Diabetes Education Program at <http://ndep.nih.gov> or call toll-free 1-800-860-8747.
- The University of Washington offers complimentary labels to paste on your medical chart to advise your health care provider that you are from an ethnic group with high risk for diabetes and that you should have your blood sugar tested annually. You can order a label for yourself and each of your family members by calling (206) 543-5597 or e-mail your request to jacds@u.washington.edu.

Pick Your Path to Health is a national public health campaign sponsored by the Office on Women’s Health within the U.S. Dept. of Health and Human Services. For more information about the campaign or to subscribe to the listserv to receive tips on improving your health, call 1-800-994-WOMAN or TDD at 1-888-220-5446, or visit the National Women’s Health Information Center at www.4woman.gov.

SAMPLE MONTHLY ARTICLE – American Indian and Alaskan Native Women

Pathways to Better Health: A Feature of the Pick Your Path to Health Campaign Access to Good Health Care, Breaking Through the Isolation

By Cathy McCarthy
Anishinaabe - Metis (Non-status)

Many years ago, I visited my uncle in a TB sanitarium where he underwent long term treatment. He caught TB working with a bush pilot bringing very sick Inuit and Cree people from their northern communities to hospitals in the south. He told me that his heart was broken seeing these people airlifted. “The people don’t die of their disease,” he said. “They die from isolation; from being cut off from everything they hold dear.” This is one of those thoughts that I have carried around ever since.

Access to health care for Indian people is still a major problem. And the problem is still much more than having a clinic or a doctor’s office nearby. It is in the spirit of all the people who have passed on, alone, afraid, and cut off from everything they held dear that I offer this discussion.

At the bottom of any talk about health care is the question of enough money to do it right. Money determines how far you must travel to a clinic that will accept you and what kind of services will be available once you get there. For most of us today, the only place to get health care is a tribal clinic, a public clinic, or a facility run by the Indian Health Service (IHS). This is because only one third of our population has private health care insurance that would allow us to go anywhere else. So you might say that makes us a captive audience in a situation dependent on enough money to work well.

According to Pamela Kingfisher, a Native health care researcher, Congress has given only 25 percent of the level of money authorized in the Indian Health Care Improvement Act of 1976. This Act was drawn up to provide proper health care and education for Indian people. In any given year, the government spends around half the health care money on Indian people that it does on other Americans. Because of funding shortages and challenges, we need to think about making the most of the services offered by the existing clinics where we live. Here are some ideas on how to do that.

Once an Indian woman is inside a clinic that accepts her, many times she is seen and treated by someone who practices only the western form of medicine. There is nothing wrong with this. In many, maybe even most cases, it gets the job done and we are satisfied. But, for many of us, there is a vast difference between the notion of treatment and the concept of healing.

Pamela Kingfisher points out that, as Indian women, “We have been and are the keepers of our culture and the traditional healing knowledge of the Grandmothers.” Those healing ways have always been based on rekindling the balance of spirit, body, emotions, and intellect. We know that treatment without healing is only temporary and may touch only one or two of these four elements.

In many communities, there is a strong movement to bring back the old ways for healing the four elements of life and combining them with the best of western medicine forms of treatment. Pamela Kingfisher speaks of several projects throughout the United States that have had great

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American Indian and Alaskan Native Women

success in doing this already. These projects have shown that when you bring in traditional healing, you can improve the people's general health and balance by spending less money on expensive western medicine. You might say, this is a powerful message. It might even be one of the ways to fight the isolation that broke my uncle's heart. And, with all the talk of runaway spending in health care in the United States, maybe the rest of America could learn something important from these projects.

With these successes in mind, the U.S. Department of Health and Human Services recently announced that they are giving American Indian and Alaskan Native tribes the right to operate, control, and redesign most IHS programs and activities if they want to do so.

While this new approach is tested, there is much we can do in our individual communities above and beyond national policies. For the rest of us, it might be more helpful to separate the big picture of providing effective and sensitive health care for all Indian people from what we can do in our individual communities.

Pamela Kingfisher says it well when she states, "Indigenous women are the mothers of their nations and that means all issues affect us. We need to maintain jurisdiction over family, nutrition, and health, but go beyond as advocates for the survival of our people and future generations."

We have an important role to play in building a good health care system in all our communities. First, we can raise our voices to make sure there is enough money and there is access to a clinic within a reasonable distance. Then we can recall the healing traditions of our Grandmothers and make sure they are made available alongside good western medicine. We can make a difference in the health of our families, our communities and ourselves right now by using those health services already available to us. One way to do that is to schedule an annual physical exam for you and everyone in your family where you know you will find good care.

There is much to do, and we are equal to the task.

Here are a few good sources of information to help lead you on the path to better health.

- Pamela J. Kingfisher, *The Health Status of Indigenous Women of the U.S.: American Indian, Alaska Native and Native Hawaiians*, (Beijing Conference, 2000), <http://www.hc-sc.gc.ca/canusa/papers/usa/english/indigen.htm>.
- Jennie Roe, Jacquetta Swift, Robert, S. Young, *The Rationing of Healthcare and Health Disparity for the American Indians/Alaska Natives*, 2002, <http://books.nap.edu/books/030908265X/html/310.html#pagetop>. You can read this document directly online.

Pick Your Path to Health is a national public health education campaign sponsored by the Office on Women's Health within the U.S. Department of Health and Human Services. For more information about the campaign, please call 1-800-994-WOMAN or 1-888-220-5446 (TDD), or visit the National Women's Health Information Center at <http://www.4woman.gov/> To request weekly health tips by e-mail, click on the box that says, "Click Here for weekly health tips by e-mail."

SAMPLE MONTHLY ARTICLES – African American Women

Pathways to Better Health: A Feature of the Pick Your Path to Health Campaign **The Number One Predictor of Diet Failure - and How to Beat It**

The Inside Story

The single most common emotional eating trigger and the No.1 predictor of weight loss relapse is stress, according to obesity expert Dr. John P. Foreyt of Baylor College of Medicine.

Being “stressed out” is a common expression nowadays. You hear this phrase often and perhaps even utter it from time to time yourself. However, do you really know what being stressed out means?

It is commonly used in a “negative” sense, and when translated it usually means you are beyond **your** *comfort or tolerance level*—physically and/or psychologically.

Stress isn’t necessarily a bad thing. It’s a natural part of living. Life without any stress is impossible. When you’re working hard, tired, hungry, emotionally charged, or sick with the flu, your body secretes hormones in response to these stressors in order to reestablish your body’s stability. That’s the inside chemistry of stress. Your challenge is to try to maintain a comfortable amount of stress that you can manage.

Recognizing Stress

“I don’t know...I start feeling anxious. My temper gets short. I feel hopeless...I know when I’m getting stressed out”, says Kathy Dyer of Bowie, Maryland, mother of three ranging in age from five months to 13 years old, and full-time policy analyst and attorney for the Federal government. Kathy is ahead of the game by the mere fact that she realizes when she has stress and can take measures to handle the situation.

Research has shown that African American women have higher levels of adrenaline in their systems as they are stressed and this can result in high blood pressure and even premature death.

“People are not as aware of the unique stresses that African American women have. In addition to the day-to-day stressors we may all encounter, for example, not having enough money or taking care of your children, African American women also have to deal with how they are viewed in this society as Black women. And that can take a toll on you,” says Dr. JudyAnn Bigby, Medical Director, Office for Women, Family and Community Programs, at Brigham & Women’s Hospital in Boston.

The first step in managing stress is to recognize that it exists. The big stressors are easy to identify—natural disasters, illness, death, births, marriage, moving, job changes. But daily life, the low-grade, day-to-day responsibilities—and yes, even things you enjoy doing that need your constant attention—are stressors and can eventually take its toll on your health. Debra Churos of

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African American Women

Alexandria, Virginia, mother of an eight-year-old daughter and part-time office worker, identified some of the following symptoms when she is stressed.

- anxiety
- short temper
- eating – anything and everything
- feeling hopeless
- crying
- irritability
- headaches
- breathing heavier, heart pounding
- more emotional/stressed around menstrual cycle

According to the American Medical Women’s Association, Debra’s symptoms are common. Whether you have these symptoms or not, you can be pretty sure that stress has some role and effect on your life and health, and it can play havoc with your weight-control efforts.

Strategies to deal with it

Stress happens. And when it does, you will react to it. The most common reaction is to eat. Actually, it’s not a bad idea to eat when feeling stressed. But what you will probably do is to eat something that makes you feel good. You know what those feel-good-foods are: ice cream, potato chips, macaroni and cheese, peach cobbler. This is especially true if you grew up using food as a stress releaser. Instead of reaching for the ice cream, Dr. Bigby recommends coming up with alternatives to release stress.

Try the following

Try healthy comfort-food alternatives: Low-fat proteins (yogurt, turkey), vegetables, and fruit. If you have a refrigerator at the office, keep some of these at the office for when you get hungry. If that’s not an option, have some fruit or cut-up raw vegetables in a plastic bag in your purse or at your desk.

Don’t sweat the small stuff: Manage your time better. Make a list of what needs to be done and prioritize them. As Debra says, “I ask myself what’s the most important thing to accomplish and what can wait.”

Find time to relax and unwind: Go to a place just for yourself (bathroom, the park, a special place in your home). Find 10-20 minutes each day to relax and to just give your mind a break.

Pray, meditate, yoga: It works for many people.

Exercise: Walk, endorphins, feel good...dance, endorphins, feel good...

Establish a support system: Join a woman’s group of any kind where you will get support and a chance to relate to others.

Reduce environmental stressors: Dislike your job? Find another one. Noisy neighbors getting on your nerves? Move. Sometimes we can’t control our environment, but when we can, it can make all the difference.

Ask for help when you need it: Ask and you shall receive.

As you pick your path to a more stress-manageable and healthy life, keep in mind, you may be as Chaka Khan and Whitney Houston profess--“Every Woman”, but, every woman still needs a break.

SAMPLE MONTHLY ARTICLES – African American Women

For more information on stress management, weight loss, and information on health-related topics contact the:

- National Women’s Health Information Center, Office of Women’s Health, U.S. Department of Health and Human Resources, www.4woman.gov, 1-800-994-WOMAN
- National Institute of Mental Health, www.nimh.nih.gov, 301-443-4513
- American Institute on Stress, www.stress.org, 914-963-1200
- American Medical Women’s Association, www.amwa-doc.org, 703-838-0500
- Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, www.cdc.gov, 1-888-232-4674.

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SAMPLE MONTHLY ARTICLE - Latinas

Pathways to Better Health: A Feature of the Pick Your Path to Health Campaign **Celebrate Your Spirituality**

It's a New Year, and you've already started making promises to yourself. You know, the ones about the new exercise plan, healthy eating, spending more time with the family, and so on.

But if you're not careful, your promises will fall victim to your busy schedule faster than you can say, "I am a priority!"

Are you really a priority? Or, do your needs come at the end of a long to do list: parenting, work, housework, etc.?

Most Latinas take care of everybody in the family before doing something for themselves. For women, who are some of the busiest people on earth, finding and celebrating your spirituality within everyday activities may be the single most generous thing you do for yourself this year.

What Is Spirituality?

Spirituality has many definitions, some of which are:

- A belief in something greater than oneself
- A sense of connection with all living things
- An awareness of the meaning of life
- The development of values

Spirituality is also closely associated with religion, but spirituality does exist outside of religion as well.

So the most important definition is *yours* to create!

"Getting together with other women is a start," says Robin Liten-Tejada of Arlington, Virginia, who participates in women's retreats and many other activities that help her find the spirituality within her.

Liten-Tejada explains that she's always been interested in spiritual things. She finds spirituality in nature in activities such as bird watching and other activities such as women's retreats.

At one retreat, she says one of the activities included drumming. When she returned home, she looked for drum circles in her neighborhood and she says that it led her to make connections with other people.

So whether you find your spiritual strength from simple, enjoyable activities such as drumming or commune with other women, creating your own spirituality is possible in

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simple, easy to do steps. But you must make the time for yourself today. Liten-Tejada says she has noticed that most of the women in her retreats are in their fifties and that many women seem to wait until their children have left home to begin to do something for themselves.

You take care of everyone, but who takes care of you in your twenties, thirties, and forties?

“We possess so much power we don’t even realize we have and we don’t access,” Liten-Tejada says of women.

How Do You Go to the Grocery Store?

To begin to create your own definition of spirituality, observe how you approach ordinary events, such as grocery shopping. Is it a chore, a stressful outing left to the last minute?

If you could make the time, how would you like to approach ordinary activities? Can you associate buying food with nourishment for the body? Or, can you find and enjoy the beauty in the multitude of colors and textures of the fruits and vegetables at the market?

Look back at your own family traditions with food. Do you recall the care and love given by your mother or grandmother to every meal they prepared? What did they know that we have now forgotten?

Did your ancestors find a strong connection between the food they prepared and the earth? Look back at other activities your ancestors did—explore the spiritual value of each and borrow liberally from such a rich cultural heritage.

Whatever form your spirituality may take, the beauty of the process of creating your own spiritual connections is that you define them.

Whether it is related to food, or to finding the joy of playing in the park with your kids, or sharing a quiet evening with a loved one at home, or rejoicing with a friend, or finding joy in the fresh start of a new year, celebrating your spirituality is possible.

How to Begin

Each person approaches spirituality differently. Some prefer private prayer, while others prefer attending church services, and yet others may find spirituality in physical exercise, reading, or community service.

Begin by considering your spirituality as part of your every activity and not a chore you have to do.

Your own path may include how you react to everyday situations, how you communicate with your family and friends, and how well you take care of yourself.

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“It makes me feel so strong. This is who I am inside,” says Liten-Tejada of how the activities she participates in make her feel.

Don’t wait until your fifties—start on your path to spirituality today!

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Monthly Article Request Form

***PICK YOUR PATH TO HEALTH* MONTHLY ARTICLES**

Pick Your Path to Health is a national, community-based education campaign from the Department of Health and Human Services' Office on Women's Health. It strives to encourage health awareness among all women, focusing on health issues as they relate to Latinas, African American, Asian and Pacific Islander, American Indian and Alaska Native women, women with disabilities, and women who live in rural areas. One component of this campaign is to provide practical, easy-to-implement steps to improve their health and well being through articles targeted to women with multiple demands on their time and energy. If you would like to have a copy of the monthly articles emailed directly to you, please complete the form below.

Name: _____

Organization: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: () _____ **Email address:** _____

PYPATH Article by Population	Yes, I'd like email copies for this population (check all that apply)
African American	
Asian and Pacific Islander	
American Indian/Alaska Native	
Latinas	

Mail or fax to: Matthews Media Group, 6101 Executive Blvd., Suite 300, Rockville, MD 20852, (301) 984-7196; attn: Debra Al-Salam

Coaches Kit: REVISED - Materials Order Form

Program Name: _____

Contact Person: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

Number of program participants: _____ Date: _____

NUMBERS FOR MATERIALS ARE LIMITED. BASED ON NUMBER OF PARTICIPANTS IN PYPH PROGRAM.

Pick Your Path to Health Materials	Quantity (No. limited)		Date Needed
Poster (18" x 36")			
Pocket Planner – African American			
Pocket Planner – Asian and Pacific Islander			
Pocket Planner – American Indian/Alaska Native			
Pocket Planner – Latinas			
Pocket Planner – Women Living in Rural Areas			
Large Planner – Women with Disabilities			
Postcards: African American Asian & Pacific Islander American Indian & Alaska Native Latinas			
Listserv Cards – available in English and Spanish	English	Spanish	
Newsletter (quarterly publication) (one subscription per organization)			
PYPH/Leading Women Letterhead	Color	B/W	
Promotional Items: Check if you would like these for your participants. Number limited to actual participants in programs. Water bottles Sun visors Tote bags			
Certificates of Completion			

Please mail or fax this form to:

Pick Your Path to Health Coordinator, 6101 Executive Boulevard, Suite 300,
Rockville, MD 20852; 301-348-1641 (phone); 301-984-7196 (Fax)

V. Resources

This section has additional health-related information and a listing of health programs and organizations to support your program. You can incorporate the information in your workshop presentations or use them as handouts.

Evaluating Medical Resources on the Internet

This useful FAQ sheet provides Internet users with tips on assessing the accuracy and reliability of on-line health information.

Information on *Women's Health USA 2002*

Women's Health USA 2002 is a report on the health status of American women and major trends impacting their wellness. This page provides an overview of the report and ordering information.

Information on *Healthy People in Healthy Communities*

Healthy People in Healthy Communities, A Community Planning Guide Using Healthy People 2010 is a publication from the Office of Disease Prevention and Health Promotion that provides information about the steps involved in forming and running a healthy community coalition. This page provides a brief overview and information on how to download it from the Internet.

Annotated Health Resources List

The Annotated Health Resources list contains telephone and Web information for a variety of government-sponsored health programs and organizations that provide educational information and materials to the public. Many of the resources offer information in both Spanish and English and have documents posted online that are available to download for free.

Information on Women's Health USA 2002

The U.S. Department of Health and Human Services Issues New Statistical Look at Women's Health

Women's Health USA 2002 is a new report that gives statistical information on the health status of America's women and shows the disproportionate impact that certain health conditions such as osteoporosis, asthma, diabetes and lupus have on women.

"For the first time, we're giving people a single place to go to get a comprehensive look at the health status of women across the nation," HHS Secretary Tommy G. Thompson said. "It reflects our ongoing commitment not only to identifying trends in women's health but also to taking the right steps to improve their health in the future."

Compiled by HHS' Health Resources and Services Administration (HRSA), the new report highlights current and historical data on some of the most pressing health challenges facing women and their families. Data are provided on health and health-related indicators in three categories: population characteristics, health status and health services utilization. It includes data showing that most U.S. women 40 years of age and older in 1998 had received a mammogram in the previous two years and a Pap smear in the previous three years. Black non-Hispanic women (83 percent) were most likely to have reported receiving a Pap smear during that three-year period.

Other highlights from the report are:

- Women's life expectancy reached a new record in 2000 -- 79.5 years. While black females had the greatest life-expectancy gain (12.3 years) between 1950 and 2000, there was still a five-year difference in life expectancy between white (80 years) and black (75 years) females.
- More U.S. women than ever before are getting prenatal care in their first trimester of pregnancy. In 2000, 83 percent received early prenatal care, up from 75 percent in 1989.
- Nearly 87 percent of women had health insurance coverage in 2000. About a quarter of women between 18 and 24 were without insurance in 2000.
- In 2000, 10,459 AIDS cases were diagnosed in females 13 and older; 38 percent were exposed through heterosexual contact. Almost half of U.S. women under 45 have been tested for HIV.

TO GET COPIES:

(75 page report)

- View and/or download and print copy from website: <http://mchb.hrsa.gov/data/women.htm>.
- Order free hard copies: call the HRSA Information Center (1-888-ASK-HRSA or visit the center's Web site at <http://www.ask.hrsa.gov>).

Information on Healthy People in Healthy Communities

The Office of Disease Prevention and Health Promotion, Office of Public Health and Science, Department of Health and Human Services has a planning guide that provides doable steps to forming a community coalition based on Healthy People 2010 goals.

Healthy People 2010 was developed by citizens from throughout the Nation, in a multiyear process that was coordinated by the U. S. Department of Health and Human Services (HHS). For two decades, HHS has used Healthy People objectives to improve the health of the American people. Healthy People 2010 is designed to achieve two overarching goals: (1) to increase the quality and years of healthy life and (2) to eliminate health disparities. (A health disparity is a gap in the health status of different groups of people, in which one group is healthier than the other group or groups.) These two goals are supported by 467 objectives in 28 focus areas. Healthy People 2010 also identifies a smaller set of health priorities that reflect 10 major public health concerns in the United States. These 10 topics highlight individual behaviors, physical and social environmental factors, and important health system issues that greatly affect the health of individuals and communities. Examined together, they constitute a set of "Leading Health Indicators" that provides a snapshot of the health of the Nation and serves to provide guidance and focus for the public, media, and elected officials.

Healthy People in Healthy Communities is a guide that takes the Healthy People 2010 goals and breaks it down into steps that can be implemented in any community. It covers: strategies for creating a healthy community, how to assess community needs and put together an action plan, as well as how to get support for others in the community by partnering with local professionals and organizations

This publication can be obtained in several ways:

Order Online

- <http://bookstore.gpo.gov>

Order by Phone

- Call (202) 512-1800

By Fax:

- Fax order forms taken from Web site to (202) 512-2250

By Mail

- Mail order forms to
Superintendent of Documents
PO Box 371954
Pittsburgh, PA 15250-7954

It can also be downloaded from the Internet at the Web site link below:

<http://www.health.gov/healthypeople/Publications/HealthyCommunities2001/toc.htm>

Evaluating Medical Resources on the Internet

The number of Web sites offering health-related resources grows every day. Many sites provide valuable information, while others may have information that is unreliable or misleading. Even if the information is reliable, it is extremely important to note that personal medical decisions should never be made on the basis of what is found on a Web site. You should always check with your health care provider about your health needs and treatment options before attempting any changes relating to your health. If you find information on the Internet you can always go over it with your health care provider so that they can provide more information and evaluate its usefulness for your specific health care needs.

This section contains important questions you should consider as you look for health information on the Internet. Answering these questions when you visit a new Web site will help you evaluate the information you find.

Who runs this site?

Any good health-related Web site should make it easy for you to learn who is responsible for the site and its information. The sponsor's name should be clearly visible on every major page of the site along with a link to the sponsor's homepage.

Who pays for the site?

It costs money to run a Web site. The source of a Web site's funding should be clearly stated or readily apparent. For example, Web addresses ending in ".gov" denote a Federal Government-sponsored site. You should know how the site pays for its existence. Does it sell advertising? Is it sponsored by a drug company? The source of funding can affect what content is presented, how the content is presented, and what the site owners want to accomplish.

What is the purpose of the site?

This question is related to who runs and pays for the site. An "About This Site" link appears on many sites. If it's there, use it. The purpose of the site should be clearly stated and should help you evaluate the trustworthiness of the information

Where does the information come from?

Many health/medical sites post information collected from other Web sites or sources. If the person or organization in charge of the site did not create the information, the original source should be clearly labeled.

What is the basis of the information?

In addition to identifying who wrote the material you are reading, the site should describe the evidence that the material is based on. Medical facts and figures should have references (such as to articles in medical journals). Also, opinions or advice should be clearly set apart from information that is "evidence-based" (that is, information based on research results).

Evaluating Medical Resources on the Internet

How is the information selected?

Is there an editorial board? Do people with excellent professional and scientific qualifications review the material before it is posted?

How current is the information?

Web sites should be reviewed and updated on a regular basis. It is particularly important that medical information be current. The most recent update or review date should be clearly posted. Even if the information has not changed, you want to know whether the site owners have reviewed it recently to ensure that it is still valid.

How does the site choose links to other sites?

Web sites usually have a policy about how they establish links to other sites. Some medical sites take a conservative approach and don't link to any other sites. Some link to any site that asks, or pays, for a link. Others only link to sites that have met certain criteria.

What information about you does the site collect, and why?

Web sites routinely track the paths visitors take through their sites to determine what pages are being used. However, many health Web sites ask for you to "subscribe" or "become a member." In some cases, this may be so that they can collect a user fee or select information for you that is relevant to your concerns. In all cases, this will give the site personal information about you.

Any credible health site asking for this kind of information should tell you exactly what they will and will not do with it. Many commercial sites sell "aggregate" (collected) data about their users to other companies—information such as what percentage of their users are women with breast cancer, for example. In some cases they may collect and reuse information that is "personally identifiable," such as your ZIP code, gender, and birth date. Be certain that you read and understand any privacy policy or similar language on the site, and don't sign up for anything that you are not sure you fully understand.

How does the site manage interactions with visitors?

There should always be a way for you to contact the site owner if you run across problems or have questions or feedback. If the site hosts chat rooms or other online discussion areas, it should tell visitors what the terms of using this service are. Is it moderated? If so, by whom, and why? It is always a good idea to spend time reading the discussion without joining in, so that you feel comfortable with the environment before becoming a participant.

How to navigate large Web sites?

Some Web sites are quite large and offer information for several groups of people. For example, some sites offer information for medical personnel as well as for general consumers. Look for keywords to identify the consumer's portion of the site, such as women's health, health information, free consumer publications. Looking at the index or site map may help save time navigating large sites. If you have trouble finding the information you are looking for on a particular site, look for a telephone number on the home page and call for help.

Annotated Health Resources List

Following is a list of resources for health information and materials on a variety of topics related to *Pick Your Path to Health* themes. The list is intended for reference only; inclusion does not indicate endorsement of sites or contents therein.

GENERAL INFORMATION

Consumer Information Center (CIC)

Phone: 719-948-4000

Web: www.pueblo.gsa.gov

The quarterly CIC Catalog lists helpful federal publications on a variety of topics, including nutrition, health, and exercise, that are available for free or a nominal fee.

Healthfinder

Phone: 1-800-336-4797

Web: www.healthfinder.gov

Features a health library reference section, special topics organized by age, ethnicity and gender, healthcare information, and a directory of other reliable Web health-related resources.

National Women's Health Information Center (NWHIC)

Phone: 1-800-994-9662

TDD: 1-888-220-5446

Web: www.4woman.gov

Contains a comprehensive, searchable health information database and links to a broad range of diverse women's health topics (healthy pregnancy, disabilities, screening & immunization) and education campaigns, including the *Pick Your Path to Health* site.

WebMD

Web: www.Webmd.com

Offers a broad spectrum of medical, health & wellness, consumer information, with links to related Web resources.

ALCOHOL & DRUG ABUSE

Al-Anon Family Group Headquarters, Inc.

Phone: 1-888-425-2666

Web: www.al-anon.alateen.org

Offers information and local support group referrals for significant others in an alcoholic person's life, including spouses (Al-Anon) and children (Alateen).

Alcoholics Anonymous (AA) World Services, Inc.

Phone: 212-870-3400

Web: www.aa.org

Provides information and local support group referrals for people seeking help with alcohol abuse. Local AA chapters may also be listed in your community telephone directory.

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Narcotics Anonymous (NA) World Services, Inc.

Phone: 818-773-9999

Web: www.na.org

Offers information and local support group referrals for people seeking help with narcotics abuse. Local NA chapters may also be listed in your community telephone directory.

National Black Alcoholism Council (NBAC)

Phone: 202-296-2696

Provides information and referrals for individuals and families dealing with alcohol abuse.

National Clearinghouse for Alcohol and Drug Information (NCADI)

Phone: 1-800-729-6686

Spanish: 1-877-767-8432

TTY/TDD: 1-800-487-4889

Web: www.health.org

Disseminates publications and materials related to drug and alcohol use and operates a resource library that is open to the public.

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)

Phone: 1-800-NCA-CALL (HOPE LINE)

Web: www.ncadd.org

Offers information and educational materials on alcoholism. Contact the HOPE LINE for phone numbers of local affiliates for treatment resources in your community.

National Institute on Alcohol Abuse and Alcoholism (NIAAA)

Phone: 301-443-3860

Web: www.niaaa.nih.gov

Offers information and educational materials on various aspects of alcoholism (underage drinking, consumption during pregnancy) and help for reducing use. Some materials are available in Spanish.

National Institute on Drug Abuse (NIDA)

Phone: 301-443-1124

Web: www.nida.nih.gov

Contains research and educational materials related to drugs and their effect on the brain, a glossary of commonly-used substances and their street names, and links to other drug-related Web resources.

DISABILITY RESOURCES

ADA Information Center for the Mid-Atlantic Region

Phone: 1-800-949-4232

Web: www.adainfo.org

Provides training, information, and technical assistance on the Americans with Disabilities Act (ADA) to businesses, consumers, and both state and local governments within the Mid-Atlantic Region (DC, DE, MD, PA, VA, WV).

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Breast Health Access for Women with Disabilities

Phone: 510-204-4866

TDD: 510-204-4574

Web: www.bhawd.org

Features information on an adaptive breast self examination and links to other health-related Web sites designed for women with disabilities.

Center for Resources on Women with Disabilities (CROWD)

Phone: 1-800-44-CROWD

TDD: 713-960-0505

Web: www.bcm.tmc.edu/crowd/index.htm

Offers information, educational materials, links that focus on issues related to health, aging, civil rights, abuse, and independent living for women with disabilities.

National Center on Birth Defects and Developmental Disabilities

Phone: 770-488-7150

Web: www.cdc.gov/ncbddd

Contains fact sheets, journal article summaries, hot topics FAQ pages, and publications on the prevention, screening, and treatment of birth defects and developmental disabilities.

National Council on Disability (NCD)

Phone: 202.272.2004

TTY: 202.272.2074

Web: www.ncd.gov

Offers information on disability-related civil rights, technical assistance, parent support organizations, and Social Security benefits, and an archive of press releases on relevant topics.

National Information Center for Children and Youth with Disabilities (NICHCY)

Phone/TTY: 1-800-695-0285

Web: www.nichcy.org

Provides technical assistance, referrals and information on disabilities and disability-related issues, specifically topics of relevance for children and youth. Information regarding support for parents is also available. Bilingual (English/Spanish) staff are available to assist callers.

Social Security Administration (SSA)

Phone: 1-800-772-1213

TTY: 1-800-325-0778

Web: www.ssa.gov

Provides information on various disability benefits available through Social Security.

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DISEASE PREVENTION

CDC National Immunization Program

Phone: 1-800-232-2522

Spanish: 1-800-232-0233

TTY: 1-800-243-7889

Web: www.cdc.gov/nip/default.htm

Contains immunization charts for children and adults, educational materials on vaccine safety, an illustrated, quick reference disease chart, and general information on the importance of proper immunization. Select information is available in Spanish.

CDC National Prevention Information Network

Phone: 1-800-458-5231

TTY: 1-800-243-7012

Web: www.cdcnpin.gov

Provides references, referrals, and information related to HIV/AIDS, sexually transmitted diseases (STDs) and tuberculosis (TB). All calls are confidential and bilingual (Spanish/English) staff are available to assist callers.

Food and Drug Administration (FDA) Office of Women's Health

Web: www.fda.gov/womens

Features materials from the FDA's *Take Time to Care* campaign for the effective management of diabetes and information about pregnancy registries to track the impact of medications taken during pregnancy.

National Cancer Institute (NCI) Information Service

Phone: 1-800-4-CANCER (422-6237)

TTY: (800) 332-8615

Web: www.cancernet.nci.nih.gov

Provides information and free publications about cancer and related resources to the public. Spanish-speaking staff members are available to assist callers.

National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)

Phone: 770-488-5080

Web: www.cdc.gov/nccdphp/nccdhome.htm

Features chronic disease prevention and promotion information, materials, and referrals to the public. Resources include bibliographic databases focusing on health promotion program information for topics including cancer prevention and prenatal smoking cessation.

National Diabetes Information Clearinghouse

Phone: 1-800-860-8747

Web: www.niddk.nih.gov/health/diabetes/diabetes.htm

Provides referrals, patient education materials, and other publications related to diabetes, and responds to telephone and e-mail inquiries.

National Digestive Diseases Information Clearinghouse

Phone: 1-800-891-8389

Web: www.niddk.nih.gov

Offers referrals, patient education materials, and other publications related to digestive diseases, and responds to telephone and e-mail inquiries.

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National Heart, Lung, and Blood Institute Information Center

Phone: 1-800-575-WELL (9355)

Web: www.nhlbi.nih.gov

Presents information and educational materials on cardiovascular health and disease prevention.

National Institute of Allergy and Infectious Diseases (NIAID)

Phone: 301-496.5717

Web: www.niaid.nih.gov

Provides referrals and comprehensive health information on allergies, asthma, and a broad spectrum of infectious diseases, including hepatitis, HIV/AIDS, Lyme disease, sexually transmitted diseases (STDs), and tuberculosis. Materials may be downloaded or ordered on-line or via mail.

NIH Osteoporosis and Related Bone Diseases National Resource Center

Phone: 1-800-624-BONE (2663)

TTY: 202-466-4315

Web: www.osteoporosis.org

Offers resources and information to the public on osteoporosis and other metabolic bone diseases. Information is targeted to at-risk populations: the elderly, men, women, and adolescents.

FAMILY ASSISTANCE

National Clearinghouse on Families & Youth

Childcare: 1-800-424-2246

Web: www.ncfy.gov

Contains an event calendar and links to resources for services and information on issues of interest to youth and families.

Childhelp USA

National Child Abuse Hotline: 1-800-4-A-CHILD (422-4453)

National Child Abuse Hotline (TTY): 1-800-2-A-CHILD (222-4453)

Web: www.childhelpusa.org

Contains resources dedicated to the child abuse prevention and intervention, including a fact sheet, guidelines and state reporting contacts, and links to local support services.

Eldercare Locator

Phone: 1-800-677-1116

Web: www.eldercare.gov

Provides referrals to local resources for seniors, and links for caregivers on accessing support and health information.

National Center for Missing and Exploited Children

Phone: 1-800-THE-LOST (843-5678)

Web: www.ncmec.org

Features educational resources and child safety publications that are available to download in both English and Spanish, photographs of missing children, and a telephone and online hotlines for reporting or providing assistance with a missing child search

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HEALTH CARE ACCESS

Bureau of Primary Health Care

Phone: 301-594-4490

Web: www.bphc.hrsa.gov

Contains a searchable database of county-level community health indicators and a community health care service locator.

CDC's Division of Cancer Prevention and Control

Phone: 1-888-842-6355

Web: www.cdc.gov/cancer

Provides general information, materials, and news on the prevention and control of a variety of cancers, and features links to specific campaigns, such as *Screen for Life: National Colorectal Cancer Action Campaign* and *National Breast and Cervical Cancer Early Detection Program*.

Centers for Medicare and Medicaid Services

Phone: 1-877-267-2323

TTY: 310-786-0727

Web: www.cms.gov

Contains consumer information on Medicaid, Medicare, and SCHIP eligibility criteria, benefits, and state contacts.

DHHS' Insure Kids Now

Phone: 1-877-543-7669

Web: www.insurekidsnow.gov

Provides state-specific information on SCHIP eligibility criteria, benefits, and contacts.

Food and Drug Administration (FDA)

Web: www.fda.gov/cdrh/mammography

Features educational materials and a database of certified mammography providers searchable by zip code. Publications include a brochure *Mammography Today: Questions and Answers for Patients on Being Informed Consumers* that is formatted for download.

National Cancer Institute (NCI) Information Service

Phone: 1-800-4-CANCER (422-6237)

TTY: (800) 332-8615

Web: www.cancernet.nci.nih.gov

Provides information and free publications about cancer and related resources to the public. Spanish-speaking staff members are available to assist callers.

National Center for Complementary and Alternative Medicine (NCCAM) Information Clearinghouse

Phone: 1-888-644-6226

TTY: 1-866-464-3615

Web: www.nccam.nih.gov

Offers fact sheets and publications on various topics in complementary and alternative medicine. Bilingual (Spanish/English) staff are available to assist callers. Fact sheets and other information may be sent via fax.

Annotated Health Resources List

Social Security Administration (SSA)

Phone: 1-800-772-1213

TTY: 1-800-325-0778

Web: www.ssa.gov

Features information about and online registration for retirement, disability, and spouses' benefits. Materials are available in English and 16 other languages.

MENTAL HEALTH

National Mental Health Information Center-Knowledge Exchange Network

Phone: 1-800-789-2647

TDD: 1-866-889-2647

Web: www.mentalhealth.org

Contains a database of fact sheets, educational materials, and links to other resources, searchable by topic. State resource guides listing local mental health services and advocacy organizations are available for download.

National Institute of Mental Health (NIMH)

Phone: 301-443-4513

Web: www.nimh.nih.gov

Contains fact sheets, summaries, brochures educational materials under the "Public" tab for general use. Publications are available to order by phone.

MINORITY HEALTH

Indian Health Service (IHS)

Phone: 301-443-3593

Web: www.ihs.gov

The Indian Health Service provides a comprehensive health services delivery system for American Indians and Alaska Natives with opportunity for maximum tribal involvement in developing and managing programs to meet their health needs. The Web site details all the programs and initiatives under this office and resources for the American Indian and Alaska Native population.

National Alliance for Hispanic Health

Phone: 866-SU-FAMILIA (helpline)

Web: www.hispanichealth.org

The National Alliance for Hispanic Health is the oldest and largest network of health and human service providers servicing over 10 million Hispanic consumers throughout the U.S. Since 1973 we have grown from a small coalition of visionary mental health providers to a large, dynamic, and strong group of organizations and individuals. This Web site highlights a variety of publications for both consumers and health care providers, as well as provide links to other health related Web sites. It also highlights three helplines it runs for hispanic families.

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Office of Minority Health

Phone: 1-800-444-6472

TDD: 301-230-7199

Web: www.omhrc.gov

Contains information on a broad range of minority health issues; responds to information requests from the public and provides referrals to local technical assistance resources. English and Spanish-speaking staff are available to assist callers.

NUTRITION, WEIGHT CONTROL & PHYSICAL ACTIVITY

American Dietetic Association

Phone: 1-800-877-1600

Web: www.eatright.org

Features information to promote healthful eating habits. The Healthy Lifestyle section contains an archive of Daily Nutrition and Healthy Lifestyle tips, Nutrition Fact sheets, and other useful materials.

Center for Nutrition Policy and Promotion

Phone: 703-305-7600

Web: www.usda.gov/cnpp

Provides information on dietary guidelines, the Food Pyramid, recipes and tips for thrifty and healthy meals.

National Heart, Lung, and Blood Institute Information Center

Phone: 1-800-575-WELL (9355)

Web: www.nhlbi.nih.gov

Presents information and educational materials on cardiovascular health and disease prevention.

National Institute of Diabetes and Digestive and Kidney Diseases - Weight-Control Information Network (WIN)

Phone: 1-877-946-4627

Web: www.niddk.nih.gov/health/nutrit/nutrit.htm

Contains information on nutrition, weight control, and obesity. The site also contains materials pertaining to the *Sisters Together: Move More, Eat Better* campaign which was designed to encourage Black women to maintain a healthy weight through physical activity and nutrition.

The President's Council on Physical Fitness and Sports

Phone: 202-690-9000

Web: www.fitness.gov

Offers exercise and physical fitness educational materials, and provides technical assistance with program design and implementation.

USDA's Food and Nutrition Information Center

Phone: 301-504-5719

TTY: 301-504-6856

Web: www.nal.usda.gov/fnic

Offers information on food and nutrition, as well as links to resource lists, databases, and other related Web sites.

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RESPONSIBLE SEXUAL BEHAVIOR

American College of Obstetricians and Gynecologists

Phone: 1-800-762-2264

Web: www.acog.com

Contains a searchable database of patient education materials on a range of women's health issues that may be ordered by phone or online.

March of Dimes

Phone: 1-888-MODIMES

Web: www.modimes.org

Spanish: www.nacersano.org

Offers a pre-pregnancy checklist to help women assess their readiness for motherhood, suggestions for talking with your partner, tips for a healthy pregnancy, nutritional information, and *Mama* magazine (in both a English and Spanish language version). The Spanish language Web site and magazine is intended to focus on the specific needs of Latinas.

CDC's National Center for HIV, STD and TB Prevention

STD Hotline: 1-800-227-8922

HIV/AIDS Hotline: 1-800-342-AIDS (2437)

HIV/AIDS Spanish: 1-800-344-7432

HIV/AIDS TTY: 1-800-243-7889

Web: www.cdc.gov/nchstp/od/nchstp.htm

Provides sexual health information, referrals to local reproductive health services, and links to educational sites. The 24-hour hotline is available to answer questions on testing, treatment, and prevention.

National Institute of Allergy and Infectious Diseases (NIAID)

Phone: 301-496.5717

Web: www.niaid.nih.gov

Provides referrals and comprehensive health information on a broad spectrum of infectious diseases, including HIV/AIDS and sexually transmitted diseases (STDs). Materials may be downloaded or ordered on-line or via mail.

National Institute of Child Health and Human Development

Phone: 1-800-370-2943

Web: www.nichd.nih.gov

Contains a searchable database of publications on subjects, ranging from acute perinatal asphyxia to women's health, available to download or order.

National Maternal and Child Health Clearinghouse

Phone: 1-800-434-4MCH

Web: www.nmchc.org

Provides educational materials and technical assistance on subjects including pregnancy, infant, child, and adolescent health, and nutrition.

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RURAL RESOURCES

National Organization of State Offices of Rural Health (NOSORH)

Phone: 785-296-1200

Web: www.ruralcenter.org/nosorh/default.htm

Contains contact information and some Web links to the Office of Rural Health for each state.

HRSA's Office of Rural Health Policy (ORHP)

Phone: 301-443-0835

Web: www.ruralhealth.hrsa.gov

Provides full-text documents on topics pertaining to rural health, including CHIP enrollment of low-income children, emergency preparedness, domestic violence, physician shortages, and rural health networks. Also offers links to other related sites.

Rural Information Center Health Service (RICHS)

Phone: 1-800-633-7701

TDD: 301-504-6856

Web: www.nal.usda.gov/ric/richs

Provides referrals, information, and publications on a range of rural health issues.

Violence Against Women – Office of Rural Domestic Violence

Phone: 202-307-6026

Web: www.ojp.usdoj.gov/vawo/about.htm

Features the *Toolkit to Prevent Violence Against Women*, which contains information and materials for community-based organizations and health providers, and links to online domestic violence resources and publications focusing on sexual assault.

TOBACCO USE

CDC's Office on Smoking and Health

Phone: 770-488-5705

Web: www.cdc.gov/tobacco

Posts the annual Surgeon General's Report on Smoking and Health, as well as health information related to tobacco use. Topics include smoking cessation, secondhand smoke, and potential impact of tobacco use during pregnancy.

NWHIC-Breath of Fresh Air

Phone: 1-800-994-WOMAN (96626)

Web: www.4woman.gov/QuitSmoking/index.cfm

Features the Surgeon General's Report, reasons and methods for initiating smoking cessation, and special sections targeting parents and teens. Information is also available in Spanish.

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VIOLENCE PREVENTION

Childhelp USA

National Child Abuse Hotline: 1-800-4-A-CHILD (422-4453)

National Child Abuse Hotline (TTY): 1-800-2-A-CHILD (222-4453)

Web: www.childhelpusa.org

Contains resources dedicated to the child abuse prevention and intervention, including a fact sheet, guidelines and state reporting contacts, and links to local support services.

National Center for Victims of Crime

Phone: 1-800-FYI-CALL (394-2255)

Web: www.ncvc.org

Features a wide range of resources, including information on policy, legislation, victim services, and online library; the site also includes a link to the Stalking Resource Center.

National Domestic Violence Hotline

Phone: 1-800-799-SAFE (7233)

TDD: 1-800-787-3224

Web: www.ndvh.org

Provides a national hotline number, local contact numbers, resource links, and information on domestic violence for teens, adults, victims, and abusers. This site also offers instructions to visitors on removing the Web address from their browser history to keep others from knowing they have visited the site.

Violence Against Women Office – Office of Rural Domestic Violence

Phone: 202-307-6026

TTY: 202-307-2277

Web: www.ojp.usdoj.gov/vawo/about.htm

Features the *Toolkit to Prevent Violence Against Women*, which contains information and materials for community-based organizations and health providers, and links to online domestic violence resources and publications focusing on sexual assault.